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British Medical Association.

NINETY-EIGHTH ANNUAL MEETING, WINNIPEG, AUGUST, 1930.

Patron: His Majesty the King.

President: Arthur H. Burgess, M.Sc., F.R.C.S., Professor of Clinical Surgery, Victoria University, Manchester.

President-Elect: W. Harvey Smith, M.A., M.D., C.M., Professor of Ophthalmology, Manitoba Medical College; Ophthalmologist, Winnipeg General Hospital.

Chairman of Representative Body: C. O. Hawthorne, M.D., LL.D., D.Sc., F.R.C.P.

Chairman of Council: H. B. Brackenbury, LL.D., M.R.C.S., L.R.C.P.

Treasurer: N. Bishop Harman, M.A., M.B., F.R.C.S.

PROVISIONAL PROGRAMME.

The Annual Representative Meeting of 1930 will be held in the British Medical Association House, Tavistock Square, London, W.C.1, on July 18th, 19th, 21st, and 22nd.

The statutory Annual General Meeting will be held in London on Tuesday, July 22nd.

The incoming President, Professor W. Harvey Smith, will deliver his address to the Association, on Tuesday, August 26th, in the Parliament Buildings, Winnipeg. The official Religious Service will be held on the afternoon of the same day.

The Annual Dinner of the Association will take place in Winnipeg, on Thursday, August 28th.

An exhibition of surgical appliances, foods, drugs, and books will be open during the Winnipeg Meeting.

On the last day of the meeting, Friday, August 29th, the Listerian Oration will be given in the Walker Theatre by Lord Moynihan, President of the Royal College of Surgeons of England.

THE SECTIONS.

The clinical and scientific work of the meeting will be organized in fourteen Sections, as shown in the subjoined list; they will meet on Wednesday, Thursday, and Friday, August 27th, 28th, and 29th, from 10 a.m. to 1 p.m.

MEDICINE.

President: The Rt. Hon. Lord Dawson of Penn, G.C.V.O., K.C.B., M.D., F.R.C.P., London.

Vice-Presidents: Professor T. Gillman Moorhead, M.D., F.R.C.P.I., Dublin; Edmund I. Spriggs, M.D., F.R.C.P., Ruthin Castle, North Wales; Charles Hunter, M.D., M.R.C.P., Winnipeg; Professor Kenneth Alexander MacKenzie, M.D., Halifax, N.S.

Honorary Secretaries: John Parkinson, M.D., F.R.C.P., 1, Devonshire Place, London, W.1; J. M. McEachern, M.B., Toronto, L.M.C.C., 102, Medical Arts Building, Winnipeg.

SURGERY.

President: The Rt. Hon. Lord Moynihan of Leeds, K.C.M.G., C.B., F.R.C.S., Leeds.

Vice-Presidents: Sir William I. De Courcy Wheeler, M.D., F.R.C.S.I., Dublin; Herbert Wm. Carson, F.R.C.S., London; Professor Brander J. Brandson, M.D., Winnipeg; John Sinclair McEachern, M.D., C.M., Calgary.

Honorary Secretaries: Hugh Cairns, F.R.C.S., The London Hospital, London, E.1; C. W. Burns, M.D., C.M., 212, Medical Arts Building, Winnipeg.

OBSTETRICS AND GYNAECOLOGY.

President: Comyns Berkeley, M.D., M.Ch., F.R.C.P., F.R.C.S., London.

Vice-Presidents: Thomas George Stevens, M.D., F.R.C.S., London; Lady (Florence) Barrett, C.H., C.B.E., M.D., M.S., London; Dame Louise McIlroy, D.B.E., M.D., London; Professor Daniel Sayre MacKay, M.D., F.R.C.S.Ed., Winnipeg; Walter William Chipman, M.D., F.R.C.S.Ed., Montreal.

Honorary Secretaries: Gertrude Dearnley, M.D., 131, Harley Street, London, W.1; F. G. McGuiness, M.D., 320, Medical Arts Building, Winnipeg.

BACTERIOLOGY, PATHOLOGY, PHYSIOLOGY, AND BIOCHEMISTRY.

President: Professor Robert Muir, M.D., F.R.S., F.R.C.P.Ed., Glasgow.

Vice-Presidents: Professor Matthew John Stewart, M.B., F.R.C.P., Leeds; Lionel Spence Ashcroft, M.B., Ch.B., D.P.H., Liverpool; Professor Wm. Boyd, M.D., M.R.C.P.Ed., Winnipeg; James Miller, M.D., F.R.C.P.Ed., Kingston, Ontario.

Honorary Secretaries: Professor Geoffrey Hadfield, M.D., M.R.C.P., Pathological Dept., Royal Free Hospital, Gray's Inn Road, London, W.C.1; A. T. Cameron, F.R.S.C., Medical College, Winnipeg.

DISEASES OF CHILDREN.

President: Robert Hutchison, M.D., F.R.C.P., London.

Vice-Presidents: Donald Paterson, M.D., F.R.C.P., London; S. T. Irwin, M.B., B.Ch., B.A.O., F.R.C.S.Ed., Belfast; Stanley Gordon Chown, M.D., Winnipeg; Professor Alan Gowans Brown, M.D., Toronto.

Honorary Secretaries: Mrs. Hazel Chodak Gregory, M.D., M.R.C.P., 142, Harley Street, London, W.1; Oswald John Day, M.D., 320, Medical Arts Building, Winnipeg.

MENTAL DISEASES AND NEUROLOGY.

President: Sir E. Farquhar Buzzard, Bt., K.C.V.O., M.D., F.R.C.P., Oxford.

Vice-Presidents: Sir James Purves-Stewart, K.C.M.G., C.B., M.D., F.R.C.P., London; George Riddoch, M.D., F.R.C.P., London; Alvin Trotter Mathers, M.D., Winnipeg; James Walter MacNeill, M.D., North Battleford, Saskatchewan.

Honorary Secretaries: C. C. Worster-Drought, M.D., M.R.C.P., 19, Cavendish Square, London, W.1; E. C. Barnes, M.D., Hospital for Mental Diseases, Selkirk, Manitoba.

OPHTHALMOLOGY.

President: N. BISHOP HARMAN, M.A., M.B., F.R.C.S., London.
Vice-Presidents: ARTHUR JAMES BALLANTYNE, M.D., F.R.F.P.S., Glasgow; NORMAN FLEMING, M.B., Ch.B., D.O.M.S., London; Professor THOS. HERBERT BELL, M.R.C.S., L.R.C.P., Winnipeg; IVOR GLEN CAMPBELL, M.D., Vancouver, B.C.
Honorary Secretaries: G. H. WHITESIDE ROBERTSON, O.B.E., M.D., C.M., The Laurels, Candie, Guernsey; F. D. MCKENTY, M.D., Medical Arts Building, Winnipeg.

LARYNGOLOGY AND OTOLOGY.

President: Sir STCLAIR THOMSON, M.D., F.R.C.P., F.R.C.S., London.
Vice-Presidents: A. J. M. WRIGHT, M.B., F.R.C.S., Bristol; FRANCIS F. MUECKE, C.B.E., M.B., F.R.C.S., London; Professor SAMUEL WILLIS PROWSE, M.D., F.R.C.S.Ed., Winnipeg; Professor HERBERT STANLEY BIRKETT, C.B., M.D., Montreal.
Honorary Secretaries: R. SCOTT STEVENSON, M.D., F.R.C.S.Ed., 137, Harley Street, London, W.1; Professor GEORGE WILLIAM FLETCHER, M.D., 215, Medical Arts Building, Winnipeg.

PREVENTIVE MEDICINE.

President: ALEXANDER STUART MURRAY MACGREGOR, M.D., F.R.F.P.S., D.P.H., Glasgow.
Vice-Presidents: T. EUSTACE HILL, M.B., C.M., D.Hy., Durham; WILLIAM GEORGE WILLOUGHBY, M.D., D.P.H., Eastbourne; Professor ALEXANDER JOSEPH DOUGLAS, M.D., Winnipeg; JOHN ANDREW AMYOT, M.D., Ottawa.
Honorary Secretaries: C. T. MAITLAND, M.D., M.R.C.P., D.P.H., 11, Beechcroft Avenue, Golders Green, N.W.11; T. A. PINCOCK, M.D., 123, Parliament Buildings, Winnipeg.

TUBERCULOSIS.

President: Professor S. LYLE CUMMINS, C.B., C.M.G., M.D., LL.D., Cardiff.
Vice-Presidents: Sir HENRY GAUVAIN, M.D., M.Ch., F.R.C.S., Alton, Hants; R. A. YOUNG, C.B.E., M.D., F.R.C.P., London; Professor DAVID ALEXANDER STEWART, B.A., M.D., LL.D., Ninette, Manitoba; CHARLES DANIEL PARFITT, M.D., M.R.C.S., L.R.C.P., Gravenhurst, Ontario.
Honorary Secretaries: R. R. TRAIL, M.D., M.R.C.P., King Edward VII Sanatorium, Midhurst, Sussex; BALDUR H. OLSON, M.B., Medical Arts Building, Winnipeg.

RADIOLOGY.

President: ALFRED ERNEST BARCLAY, M.A., M.D., D.M.R.E., Cambridge.
Vice-Presidents: MALCOLM DONALDSON, M.B., F.R.C.S., London; E. P. CUMBERBATCH, M.B., M.R.C.P., D.M.R.E., London; JAMES CURRIE MCMILLAN, M.D., Winnipeg; J. EUGENE PANNETON, M.D., Montreal.
Honorary Secretaries: ROY WARD, M.B., B.S., Radium Institute, Riding House Street, London, W.1; FRANK ANDREW SMITH, M.D., 491-421, Somerset Block, Winnipeg.

MEDICAL SOCIOLOGY AND HISTORY OF MEDICINE.

President: Sir HUMPHRY ROLLESTON, Bt., G.C.V.O., K.C.B., M.D., F.R.C.P., Cambridge.
Vice-Presidents: JOHN D. COMRIE, M.D., F.R.C.P.Ed., Edinburgh; R. G. MCGOWAN, M.D., Manchester; Sir JAMES BARRETT, K.B.E., C.B., C.M.G., M.D., Melbourne; J. H. HARVEY PIRIE, M.D., F.R.C.P.Ed., Johannesburg, S. Africa; HARRY MARTINDALE SPEECHLY, M.R.C.S., L.R.C.P., Winnipeg; Professor JAMES WELLINGTON CRANE, M.D., London, Ontario.
Honorary Secretaries: JOHN D'EWART, M.B., "Silverburn," Charlestown Road, Blackley, Manchester, E.; Professor J. C. B. GRANT, M.B., F.R.C.S.Ed., 307, Niagara Street, Winnipeg.

ANAESTHESIA.

President: RAYMOND E. APPERLY, M.R.C.S., L.R.C.P., London.
Vice-Presidents: H. W. FEATHERSTONE, M.D., Birmingham; I. W. MAGILL, M.B., B.Ch., London; Professor WILLIAM WEBSTER, M.D. Winnipeg; WESLEY BOURNE, M.D., Montreal.
Honorary Secretaries: F. B. PARSONS, M.B., M.R.C.P., 56, Trumpington Street, Cambridge; D. C. AIKENHEAD, M.D., 1095, Wolseley Avenue, Winnipeg.

ORTHOPAEDICS.

President: E. LAMING EVANS, C.B.E., M.D., F.R.C.S., London.
Vice-Presidents: HERBERT PETER HOWELL GALLOWAY, M.D., C.M., Winnipeg; WILLIAM GEORGE TURNER, M.D., C.M., Montreal. (The names of the British Vice-Presidents will be announced later.)
Honorary Secretaries: R. WATSON JONES, F.R.C.S., 84, Rodney Street, Liverpool; A. P. MACKINNON, M.D., 661, Broadway, Winnipeg.

The Honorary Local General Secretary of the Annual Meeting is Dr. J. D. Adamson, 102, Medical Arts Building, Winnipeg, Manitoba.

Particulars of the journey to Canada, and of various alternative tours, may be obtained from the Financial Secretary and Business Manager, B.M.A. House, Tavistock Square, London, W.C.1.

ANNUAL MEETING AT WINNIPEG, 1930.

PROVISIONAL TABLE OF EVENTS.

MONDAY, AUGUST 25TH.

9.0 a.m.—Registration, Winter Club.
9.0 a.m.—C.M.A. Council, Royal Alexandra Hotel.
1.0 p.m.—M.M.A. and S.M.A. Annual Meetings.
2.30 p.m.—Boating and Tea, Kenora and Minaki.

TUESDAY, AUGUST 26TH.

9.0 a.m.—Registration, Winter Club.
9.0 a.m.—President opens Exhibition, Winter Club.
? 10.30 a.m.—Addresses of Welcome; Reception of Delegates; President's Address (Winter Club).
2.30 p.m.—Robing, Law Courts.
3.0 p.m.—Cenotaph Ceremony, The Mall; Religious Service (open air), Parliament Buildings.
9.0 p.m.—President's Reception, Parliament Buildings.

WEDNESDAY, AUGUST 27TH.

10.0 a.m.—Sectional Meetings, Winter Club and Court Houses.
1.0 p.m.—Irish Graduates' Luncheon.
2.0 p.m.—Clinical Address, Winter Club.
4.0 p.m.—Excursion to Lower Fort (18 miles from Winnipeg).
8.30 p.m.—Public Meeting, Walker Theatre.
9.0 p.m.—Dance Reception, Royal Alexandra Hotel.

THURSDAY, AUGUST 28TH.

8.30 a.m.—National Temperance League Breakfast.
10.0 a.m.—Sectional Meetings, Winter Club and Court Houses.
1.0 p.m.—Sectional Lunches; Alumni Classes; Golf.
2.0 p.m.—Two Clinical Addresses, Winter Club.
3.0 p.m.—Conferment of Degrees, Parliament Buildings.
4.0 p.m.—Garden Parties, Private Houses.
7.0 p.m.—Annual Dinner.
8.30 p.m.—Public Meeting; Exhibitors' Smoking Concert.
9.0 p.m.—Dance.

FRIDAY, AUGUST 29TH.

8.30 a.m.—Medical Missionary Breakfast.
10.0 a.m.—Sectional Meetings, Winter Club and Court Houses.
1.0 p.m.—Sectional Lunches; Alumni Classes; Golf.
2.0 p.m.—Two Clinical Addresses, Winter Club.
4.0 p.m.—Assiniboine Park Garden Party.
9.0 p.m.—Listerian Oration, Walker Theatre.

CURRENT NOTES.

Inquiry into the Incidence of Cancer and its History After Treatment.

IN order to assist the Honorary Director of the Collective Research into the Incidence of Cancer and its History after Treatment, practitioners who have undertaken to fill in these inquiry forms are asked, in respect of those patients who have already died, to complete the relative forms regarding those patients, and to forward them as soon as possible to the Medical Secretary of the British Medical Association, B.M.A. House, Tavistock Square, London, W.C.1.

Durham County Council and the Salaries of its Medical Officers.

The Durham County Council, always a progressive body as regards public health matters, has recently not only approved the new scale of salaries which has been under discussion between the British Medical Association and the bodies representing the various local authorities, but has adopted it to come into force on April 1st next. All the officers in charge of departments will have an initial increase on April 1st and then biennial increases of 25 per cent. above their basic salary. The salary of the county medical officer has been fixed at £1,600, rising by annual increments of £50 to £1,800, and Dr. Franks, at present acting as deputy to Dr. Eustace Hill (who retires shortly), has been appointed to the post. The council has also decided to appoint a deputy county medical officer at a commencing salary of £1,000, rising by annual increments of £50 to £1,200; this salary is above the scale. The County Education Committee has also adopted the scale.

PROCEEDINGS OF COUNCIL.

Wednesday, February 5th, 1930.

A MEETING of the Council of the Association was held at the Association House, Tavistock Square, W.C., on Wednesday, February 5th, at 10 a.m. Dr. H. B. BRACKENBURY, Chairman of Council, presided, and there were present the following:

Professor A. H. Burgess (President), Dr. C. O. Hawthorne (Chairman of Representative Body), Mr. N. Bishop Harman (Treasurer), Sir Ewen Maclean (Past-President), Dr. G. A. Allan, Dr. J. Armstrong, Dr. F. J. Baildon, Dr. Harold S. Beadles, Sir Robert Bolam, Dr. J. W. Bone, Dr. H. C. Bristowe, Dr. G. F. Buchan, Dr. J. D. Comrie, Dr. H. G. Dain, Dr. C. E. Douglas, Mr. W. McAdam Eccles, Dr. D. E. Finlay, Dr. R. Forbes, Dr. T. Fraser, Dr. E. R. Fothergill, Dr. F. W. Goodbody, Dr. R. G. Gordon, Surgeon Rear-Admiral J. Falconer Hall, Colonel A. E. Hamerton, Dr. R. Wallace Henry, Dr. J. Hudson, Dr. R. Langdon-Down, Dr. E. K. Le Fleming, Dr. R. W. Leslie, Dr. E. Lewys-Lloyd, Dr. J. Livingstone Loudon, Sir Richard Luce, Dr. P. Macdonald, Dr. S. Morton Mackenzie, Dr. O. Marriott, Dr. J. C. Matthews, Dr. J. B. Miller, Dr. Christine Murrell, Lieut.-Colonel F. O'Kinealy, Dr. W. Paterson, Dr. W. J. Phelan, Dr. J. R. Prytherch, Dr. F. Radcliffe, Dr. C. G. C. Scudamore, Mr. H. S. Souttar, Dr. John Stevens, Lieut.-Colonel Ashton Street, Dr. W. E. Thomas, Dr. G. Clark Trotter, Mr. E. B. Turner, Dr. W. Watkins-Pitchford, Dr. J. F. Walker, and Sir William Wheeler.

Apologies for absence were received from Dr. A. Lyndon (Deputy Chairman of Representative Body), Mr. T. P. Dunhill, Dr. C. E. S. Flemming, Dr. F. J. Gomez, Mr. A. W. Nuthall, Dr. R. C. Peacocke, Captain N. J. Roche, and Dr. E. H. Snell.

Preliminary Business.

The Chairman reported the death of Dr. H. F. Oldham of Morecambe, who was a member of the Council from 1912 to 1915, but who, he said, was better known in connexion with his work on the Insurance Acts Committee. A vote of condolence was carried by the members standing.

Resolutions were read from the Victorian, New South Wales, and Queensland Branches of the Association, and from the Canadian Medical Association, in which tribute was paid to the late Sir Jenner Verrall.

The congratulations of the Council were accorded to Sir Andrew Balfour of London, and Sir Stanley Seymour Argyle of Melbourne, on the recent honours conferred upon them.

A message of sympathy was sent from the Council to Mr. W. E. Hempson, formerly Solicitor to the Association, who was lying seriously ill.

The Medical Secretary submitted a long report on the Annual Conference of the Association Professionnelle Internationale des Médecins, held at Berlin, which he attended in September. The Chairman said that the relevant parts of this report would be referred to the appropriate committees. He drew attention to a remark in the report concerning the *Revue Internationale*, which contained a full report of the proceedings of the conference, along with much medical, political, and organization news from the medical groups in various countries. The hope was expressed that many medical men would become direct subscribers to the *Revue*, which costs only 4 Swiss francs (3s. 3d.) a year.

The Chairman stated that a communication had been received from Dr. Bernard, Secretary of the Journées Médicales of Belgium, to the effect that in connexion with the commemoration of Belgian independence at the end of June, 1930, the British Government had been asked by the Belgian Government to send an official medical delegate to the tenth session. In view of the importance of the occasion, and the large number of members of the medical profession who would be attending from many countries, the profession in Belgium would not like to see the British medical profession unrepresented. Dr. Bernard therefore asked that the British Medical Association should urge on the Government the desirability of sending such a delegation. He also intimated that an invitation would be sent to the Association itself to participate in the function. On the motion of Dr. Wallace Henry, it was agreed to ask the Ministry of Health to send a delegation.

It was agreed to send a representative to the conference of the National Safety First Association, to be held in Liverpool in May next, and Mr. E. B. Turner consented to act in that capacity. The Chairman stated that he had asked Dr. G. F. Buchan of Willesden, and Dr. Naylor Barlow of Wallasey, to act as delegates of the Association at the Congress of the Royal Sanitary Institute.

Permission was given for the holding of the annual Temperance Breakfast, the Medical Missionary Breakfast, and the Irish Graduates' Luncheon at Winnipeg on the occasion of the forthcoming Annual Meeting at the close of next August.

A suggestion was brought forward on behalf of two members who had been official delegates of the Association to visit Oversea Branches, that the Council should take steps to approach the Inland Revenue authorities in regard to their refusal to allow any part of the expenses incurred in connexion with such visits as a charge against the income of their practices for income tax assessment. It was stated that one of these members had made an appeal from the adverse decision of the Inspector of Taxes to the Commissioners, but the latter, while sympathetic, ruled, on purely legal grounds, that the refusal of the inspector must be upheld.

The Medical Secretary stated that with the two members in question it was by no means a pleasure trip, for they were giving lectures and demonstrations, and one of them was undertaking operations for instructional purposes throughout the visit. One member of the Council stated that, after visiting America and Canada and giving lectures, he similarly appealed to the Commissioners from a refusal of the inspector, and he was allowed to deduct one-half of his expenses in making his income tax return. The Council authorized the Office Committee to take such action as it thought fit with the Board of Inland Revenue.

The Past-President's Visit to Oversea Branches.

Sir Ewen Maclean, who was received with applause on his return from his visit to the Australasian Medical Congress and to various Oversea Branches, gave an interesting report of what he described as a wonderful tour. His first call strictly on Association duty was at Wellington, New Zealand, where he was met by Dr. J. S. Elliott, the president of the Branch. Here he desired to say that there were two points which came up for earnest consideration, and were discussed at every centre in Australasia and on the way home. The first was the urgent need of additional facilities for post-graduate work in Great Britain. The attractions which America could offer in this respect were everywhere recognized, and it was felt also that in time and money there was a great saving in going to America; but the feeling of the colleagues overseas was that if only there were facilities in the home country these would have the preference, and would be more in keeping with what they desired. The second question considered was the hospital question. With regard to New Zealand, he was bound to say that he did not know any part of the Empire where the hospital conditions were less satisfactory, yet in that Dominion 98 per cent. of the members of the medical profession belonged to the Association. On inquiring as to the reason for this state of affairs, he gathered that there had been many discussions on the subject, but executive action was always deferred in view of reports made from the Association members who were inside the State machinery.

His stay in Wellington was delightful, but he had to hurry on with the next stage of his tour, the objective of which was Sydney, 1,300 miles away. The harbour of Sydney was entered on an ideal morning, and he fully appreciated the intense pride which the Sydney people felt in their harbour. On landing he was welcomed by his host, Dr. Barkworth. Of the Congress, which had been reported already in the *British Medical Journal* at some length (November 16th, 1929, p. 921, and November 23rd, p. 974), he would mention only one or two outstanding events. It was a large congress; well over 1,000 members registered, and many of them brought their womenfolk. The organization reflected the greatest credit on all concerned, especially Dr. Palmer and Dr. Lipscomb, and, of course, the indispensable Dr. Todd, secretary of the Federal Committee, whose work for the Association was appreciated at home as well as in his own country. The inaugural meeting took place in the Town Hall, Sydney. At all points the general arrangements for the Congress followed those of the Annual Meetings of the Association at home. On the platform was the Governor-General of the Commonwealth, Lord Stonehaven, and among other distinguished visitors from this country were Dame Janet Campbell and his own namesake, Professor Hugh MacLean. Dame Janet Campbell had undertaken a very difficult task in Australia, and at every centre he visited the method and manner of her

attack on the problem she was sent to Australia to solve were highly appreciated, both by official and by lay bodies. As for Professor MacLean, it was inevitable that some mistakes should occur owing to the similarity of the name, and he (Sir Ewen) had had the proud satisfaction of being regarded by some people as a world-renowned authority on peptic ulcer, and of being asked for the advantage of his advice on the subject, while he believed that Professor MacLean had corresponding difficulties when questions relating to another branch of medicine with which he was comparatively unfamiliar were addressed to him.

The proceedings of the Section of Obstetrics and Gynaecology interested him greatly, especially the discussion opened by Dr. Jellett of Dunedin, on the future of obstetrical practice. This had been reported in the *Journal*. The symposium on cancer research led to a valuable discussion of the whole Congress in the Great Hall of the University, when what had already been done and what it was contemplated to do in cancer investigation and treatment was considered. This discussion had also been reported, and it was sufficient to say that it proved exceedingly instructive.

On the last day of the meeting he had the honour of being invited, as representative of the Association at home, to lay the foundation stone of the new British Medical Association building in Sydney. This would be the headquarters of the New South Wales Branch, and would be a very striking building. Its cost was estimated at more than £130,000, and its accommodation was entirely appropriate to its proposed use. He had the privilege also of offering to give, on behalf of the Council, as a token of affectionate goodwill to their Australian colleagues, some piece of furniture for the congress hall. After consultation, it was suggested that this should take the form of an ornamental clock of suitable design, and he had no doubt that in due course the Secretary would be in correspondence on that subject. The offer was very gratefully accepted. (Applause.)

At every centre he visited he referred to the approaching centenary of the Association in 1932; and everywhere he found the greatest disposition to make arrangements in Australia such that events there would not clash with the occasion, and therefore many members in Australia would be enabled to come to London.

With regard to the entertainment and hospitality he received, he could not speak with too much gratitude. He hoped to embody some account of this and other aspects of his visit in the form of a booklet, which would be presented to members of the Council.

A question that arose, particularly at Brisbane—which he visited next after Sydney—was the desirability of setting up in Australasia something analogous to the Representative Meeting. This was a very difficult problem, but in Brisbane especially it was felt that something of the kind was desirable, having regard to the fact that in Queensland the question of the embodiment of medical benefit in some State insurance scheme had arisen. The endeavour would be made in the arrangements to combine the maximum amount of existing machinery and adapt it to the purposes required.

In Brisbane he had the great pleasure of being entertained by the Governor of Queensland, Sir John Goodwin, formerly Director-General of the Army Medical Services, who bade him convey to the Council his salutations. At this point in his tour he was specially impressed by the Air Medical Service, which represented one of the most romantic developments of the aeroplane. On an S.O.S. from hundreds of miles away in the bush an aeroplane would be sent with a doctor and, if necessary, a nurse in attendance, and there was stretcher provision for the case to be removed, if this course was decided on, to a hospital centre. The development was very wonderful and inspiring.

On the way back from Brisbane he stayed at Canberra, which was a very remarkable place. He was the guest of the Governor-General, and Dr. Cumpston, the Director-General of Health in Australia, was his guide and friend during that visit. There were many things which might be said about Canberra, but it was enough at the moment for him to remark that, in his view, it was the outward and visible sign of the unquenchable faith of Australians that their country had a great future.

After Canberra he went on to Melbourne—a great city, which had views of its own importance as compared with Sydney. At Melbourne he was received by Dr. Zwar, president of the Branch, and by others, including Dr. Hamilton Russell, who was a visitor to this country on the occasion of the Lister centenary two or three years ago (he was one of Lister's house-surgeons). One of the interesting people he met in Melbourne was Dr. David Grant, who was a graduate at Edinburgh in 1876. Dr. Grant bade him bear his salutations to a distinguished member of the Council at home, Dr. C. E. Douglas, who was his fellow student at Edinburgh and co-resident at the Royal Infirmary.

At Melbourne there was an excellent Association House, well appointed in every way, and the centre of great activity. From Melbourne he crossed the rather dreaded Bass Straits to Tasmania, and spent a night or two at Launceston, which was reached after a forty-mile journey through the beautiful scenery of the River Tamar. Much of Tasmania had been settled by people migrating from the south-west counties of England and certain parts of South Wales, and was interesting to him on that account. Hobart was very wonderful. In this city, by the way, one of the most extraordinary of hospital problems had arisen. He could not give details, but perhaps he might say that in order to bring the work of a particular man—not at that time a member of the medical profession—into line an Act of Parliament was passed which had the effect of creating him, irrespective of curriculum or diploma, a member of the profession, and competent to treat and to engage in consultation. The plans of the members of the Branch there were discussed, and these had since come to fruition in the very desirable form of a settlement.

While in Tasmania he visited the famous Port Arthur, a derelict convict settlement, and thanked Heaven that such places were no longer to be found in the British Empire. To this place was sent Dr. Wainwright, a celebrated poisoner, to work out his sentence, and he behaved so well that he was allowed out on ticket of leave, and after a short time was appointed dispenser to the infirmary at Hobart! No further misdeeds had been traced to him, and it was to be assumed that his conversion was complete.

Returning to the mainland, he made his way to Adelaide, where a similar programme was carried through. Here again the most cordial greetings were sent to the Council, and the most loyal feelings were expressed towards the Association and profession at home, with whom it was desired to keep in closer touch. At all points in his trip Dr. Cox was affectionately remembered.

From Adelaide he followed the course of the great desert railway for about 1,500 miles, seeing on the way something of the goldfields, being permitted to inspect the process of crushing gold, and also obtained a glimpse of the Australian aboriginals, a dwindling race who had already died out entirely in Tasmania, and whose general physique was so poor as to excite compassion. At every point he met members of the British Medical Association, and in all but name, thanks to the Association's prestige, he was given a really royal welcome. He arrived finally at Perth in Western Australia, where again the same programme was gone through, with many talks about Association affairs. In total he delivered, short and long, not fewer than fifty speeches during his tour.

Leaving Australia, he went north up to Malaya and Ceylon, visiting Colombo and Kandy, where he met about a hundred doctors and senior students, under the chairmanship of Dr. S. Muttiah, president of the Ceylon Branch. The next visit was to Bombay, where he was again greeted by the president of the Branch, Colonel A. F. Hamilton, I.M.S. Here again, as in other places, he had one or two suggestions to transmit to the Medical Secretary's office. Then, through the Red Sea and the Canal, he passed on to Egypt, where he spent a wonderful fortnight. The first week was spent in Cairo under the care of Dr. W. H. Wilson, president of the Egyptian Branch, which was a very progressive Branch indeed. Political events were very disturbing in Egypt. The tendency was for the native doctors to fill all the more valuable appointments, but this policy was not regarded favourably by the wiser heads of the Egyptian State, and some modifications of the contract had been proposed and put into operation with regard to British doctors out there. When one regarded the wonderful work of the British doctor in Egypt, one could not be astonished that those who looked ahead regretted the prospect of anything like the loss of the services of these men through political developments. At Assouan Dam he again met members of the Association, who cordially greeted him.

The last week of his tour was spent in Palestine, where again the service of the British in the matter of public health was of outstanding significance. Colonel Pelham, Director-General of Public Health, took him round the various hospitals and public health services. He claimed with pride that malaria had been practically eliminated from Palestine, and that there had been a tremendous reduction in enteric and other fevers. He had the pleasure of dining with the British representative there. Arising out of his visit, a Branch of the Association was being established in Palestine. (Applause.)

In conclusion, Sir Ewen Maclean said that it had been indeed a great privilege to make this journey, which had involved 37,000 miles of travel, and which he had achieved without a scratch or a misfortune of any kind, never missing a meal or parting with one. It had abundantly enriched his acquaintance with this very wonderful world, it had created for him what he believed to be enduring friendships with men and women who were doing pioneer work in the parts of the world he had visited, and it had enhanced his sense of the importance and privilege of membership of this great Association. He came back with a larger view of the importance of the Oversea Branches, and with a feeling that it was more than ever incumbent upon members of the Association, individually and corporately, to prove themselves worthy of their great heritage. (Applause.)

The Chairman said that the Council would desire to place on record a vote of thanks to Sir Ewen Maclean for the distinguished services which he had rendered the Association as a result of his tour.

This motion was carried unanimously and with acclamation.

Ship Surgeons and Post-Graduate Training.

It was reported that the attention of the Association had been drawn to the fact that the question of the special qualifications of ship surgeons had been engaging the attention of various European Governments. In some countries, such as Spain, France, and Italy, a candidate was required to undergo a special course in marine hygiene and to pass an examination before he could become a ship surgeon, but in England no special qualifications were required, and no special courses of lectures or instruction were available.

Dr. Bone, in moving that the Council set up a special committee to consider the subject, said that this was the kind of task which the Association could accomplish very well indeed. If the Association did not take action some other body would.

Dr. Hawthorne, while agreeing that the committee should be set up, said that it must not be assumed that the Association was in favour of erecting some new system of examination and diploma. The medical diplomas already existing were somewhat numerous, and likely to lead to confusion in the public mind by creating a supposition that the existing regulations under which licences to practise were conferred were insufficient to qualify medical practitioners to undertake work for which they judged themselves to be competent, and the responsibility of which they were ready to undertake. But the proposal for an inquiry was one to which he would not like to return a negative, subject to such qualifications as he had indicated.

Dr. Peter Macdonald, as one who for a short time had been a ship surgeon, took no exception to this proposal so long as it was clearly understood that the Council did not commit itself at present to any approval of the suggestion for a new diploma. Even if the need for a diploma were shown, it must be remembered that the opportunities for the ship surgeon were small, and the emoluments not such as to attract any special class of practitioner. Many of the ship surgeons were young men who had joined the service in order to obtain a certain amount of unusual experience before seeking other lines of practice.

Dr. Matthews, as one who came from a seaport (Liverpool), thought the Council could do no harm by referring this matter to a committee, but with a perfectly open mind. The question was certainly worth investigating, and possibly one of the seaport universities might establish some sort of diploma.

Dr. Douglas said that he had read with mingled feelings what was set out on the agenda. This subject, which was apparently new to the Council and to those who represented the profession in this country, had occupied the profession in other countries for some time. But he supposed that history would repeat itself—namely, that Great Britain, arriving late, would still reach the goal. Beginning by being behind other nations in respect of the ship surgeons' service, this country would probably end by having a service better than any other. The service was exceedingly important to a maritime race, and he hoped it would be given the consideration it deserved.

The Council agreed to set up a special committee, which, it was understood, would approach the question without prejudice. The Medico-Political Committee was asked to report as to the personnel of the proposed committee.

The Mental Treatment Bill.

Dr. Langdon-Down, chairman of the Lunacy and Mental Disorder Committee, brought forward two reports on the Mental Treatment Bill now before Parliament. He reminded the Council that at its last meeting in December the bill was actually before the House of Lords. The amendment by Lord Sandhurst, which was considered by the Council, was not moved in the House, but quite a number of amendments of a useful kind, which the Association had proposed or which had its support, were embodied in the measure. Owing to the rapidity with which the Government had moved it had been a little difficult to keep pace. The committee, before approaching the Minister of Health, had an interview with Mr. Stuart Bevan, K.C., and Mr. H. C. Dickens, as to possible amendment in the direction of strengthening Clause 16 (1) (2) of the bill,* which dealt with the protection of the certifying doctor. The question was put to Mr. Stuart Bevan whether Lord Sandhurst's amendment added substantially to the protection afforded to the doctor, and after careful consideration Mr. Bevan replied that it did not. Mr. Bevan was also asked whether the so-called transfer of onus which resulted from the amended protection clause did in fact, in his opinion, increase the practitioner's safety. As a result of discussion, it was decided that Mr. Bevan should draft a further amendment of the clause. The clause, as set out in the bill, read as follows:

"(2) If any proceedings are taken against any person for presenting any such petition or for signing or carrying out or doing any act with a view to signing or carrying out any such order, report, or certificate as mentioned in Subsection (1) of this section or doing anything in pursuance of this Act, such proceedings shall, on application to the High Court, be stayed on such terms as to costs and otherwise as the Court may think fit, unless the Court is satisfied that there is substantial ground for alleging that such act was done in bad faith or without reasonable care."

It had been decided to urge the Minister of Health to adopt an amended form of the clause as drafted for the Association by counsel:

"(2) If any proceedings are taken against any person for presenting any such petition, or for signing or carrying out or doing any act with a view to signing or carrying out any such order, report, or certificate as mentioned in Subsection (1) of this section or doing anything in pursuance of this Act:

"(*a*) The person taking such proceedings shall apply to the High Court for leave to proceed therein, after service of the writ, and before taking any further step in the said proceedings. Fourteen days' notice of such application shall be given to every other party to the said proceedings. Upon hearing such application, the Court shall refuse leave to proceed, and shall stay the said proceedings on such terms as to costs and otherwise as the Court thinks fit, unless the Court is satisfied that there is substantial ground for alleging that such act was done in bad faith or without reasonable care.

"(*b*) Where the person taking such proceedings shall have taken any further step therein, after service of the writ, and without having obtained leave to appeal upon an application for leave to proceed as required by subparagraph (*a*) of this subsection, or where the said person has taken no further step therein, after the service of the writ, and failed to make such application for leave to proceed within a reasonable time from the date of service of the writ, the High Court shall on the application of any other party to the said proceedings stay the said proceedings on such terms as to costs and otherwise as the Court thinks fit."

A letter had now been received from the Ministry of Health intimating that the proposed amendment had been carefully examined, but that it appeared to the Minister to be doubtful whether the revision would secure to the medical profession substantially greater protection than that given in the bill, and that he had come to the conclusion that he could not adopt the modification as a Government amendment. If such an amendment were moved in committee the Minister would feel bound to state the view of the Government, but, on the other hand, he would not resist an amendment such as the Association proposed if the general feeling of the House was in favour of it. It had been arranged to send a deputation to the medical members of the House of Commons to place before them the

* The text of the Mental Treatment Bill as introduced into the House of Lords by Earl Russell was printed in the *Supplement* of December 7th, 1929 (p. 247).

views of the Association on this and other matters with regard to the Mental Treatment Bill. The legal advisers of the Association would no doubt consider whether the amendment could not be framed in a somewhat briefer form. Dr. Langdon-Down added that when the committee met the Minister on January 15th—and here the committee was greatly indebted to Dr. Hawthorne for the lucid way in which he had put forward to the Minister on that occasion the arguments in favour of "witness status"—it was gathered that although the Government was ready and anxious to pass the Mental Treatment Bill into law, yet if it proved highly controversial it would probably be dropped. The Ministry was very reluctant to accept any amendment to this particular clause which departed at all widely from the recommendation of the Royal Commission. The medical profession, however, would feel that it would be extremely valuable to have some such amendment adopted. What the profession wanted was not so much to secure that, should a case arise, the doctor would win it, but that the doctor should be protected from the anxiety and worry and expense occasioned by vexatious and frivolous actions. It was pointed out to the Minister that the spokesmen of the Government in the House of Lords had themselves expressed anxiety as to whether the protection afforded by the bill as it stood was sufficient.

On one point his committee desired to obtain the definite opinion of the Council—namely, as to a time limit for actions against certifying practitioners. There was a difference of opinion in the committee as to whether a time limit would be a deterrent or not, and, therefore, the following recommendation was put down in order to ascertain the opinion of the Council:

> "That it be represented to the Minister of Health that the Mental Treatment Bill be amended to provide that there should be a time limit of six months during which a person discharged 'recovered' may institute a legal action against a medical practitioner for alleged wrongful detention."

It was the view of some that when a patient was discharged "recovered" he was not inclined to take any steps in the way of a resort to law, but in course of time there might be a tendency to relapse, and it was then that he began to entertain vengeful feelings, and perhaps to meditate such action. A time limit of six months might therefore be desirable.

Dr. Bone opposed the recommendation. This was a highly contentious proposition, which, if pressed, would endanger the bill, and he thought the Council generally was anxious that the bill should go through if possible. He believed that what was proposed in the recommendation would have the effect rather of provoking action against the certifying practitioner.

Dr. Hawthorne said that in the committee the proposal to have a time limit was carried, but it was also agreed that before any action was taken the matter should be reported to the Council for its decision. He regarded the phrasing of the recommendation as unhappy, because it suggested to a potential plaintiff that he might do a certain thing. If the recommendation were accepted it should be phrased the other way round—namely, that a patient may not institute an action unless he does it within six months after "recovery."

With regard to the general report of the committee, Dr. Hawthorne desired only to make one or two remarks. The experts stated that these proposals would mean greater facility in bringing mental patients under treatment at an early date, and therefore more effectively. Personally, if he had to judge from the wording of the measure, he would not come to that conclusion with any great confidence. He agreed, however, that the Mental Treatment Bill would enable medical practitioners and other advisers to persuade patients to enter institutions as voluntary boarders. A further point he wished to make was that in the mild case (not the voluntary patient) the use of the phrase "incapable of volition" would limit the value of the proposal very severely indeed, and he was afraid that no considerable number of patients would be sent in on this recommendation. On the main issue of protection of the certifying doctor, he felt that when the committee met the medical members of the House of Commons it would be bound to uphold the view that a practitioner acting under the Lunacy Act ought to be protected against legal proceedings, provided that his certificate did not contain deliberate misstatements of fact. No one would pretend that the protection at present afforded was anything like sufficient.

Dr. Christine Murrell said that at first the idea of a six-months' time limit seemed rather attractive, but the longer the discussion continued—and in that discussion representatives of the Royal Medico-Psychological Association took part—it seemed much more likely to be used as a suggestion that people must take action before the six months had expired.

The Chairman said that the committee desired to proceed with the support of the Royal Medico-Psychological Association, but with regard to this particular amendment the representatives of that body had assured the committee that they could not give any guarantee that those whom they represented would support a recommendation framed on these lines. Time limits of this nature were rather provocative in character.

The recommendation in favour of a time limit was put to the Council and lost. The report of the committee was approved.

National Ophthalmic Treatment Board.

The Finance Committee brought forward a report endorsing a recommendation by the Ophthalmic Committee that the Association, subject to certain satisfactory arrangements, should afford a limited guarantee to the Thayer Trust (the body which conducts the financial side of the operations of the National Ophthalmic Treatment Board) to assist in meeting the administrative expenses of the Board. The Treasurer, in supporting the proposal, said that the Finance Committee thought that the arrangement should be quite clear before the Council entered into any such guarantee.

Dr. Bone opposed the proposal, urging certain contingencies and liabilities, and pointing to the relatively slow progress of the ophthalmic scheme. Dr. Peter Macdonald put forward certain arguments in support of the proposal. One argument was based on sentiment—namely, that if the Association gave a certain amount of financial backing to the scheme it would bring in a number of ophthalmologists who had held aloof so long as the business side of the scheme was entirely a lay concern. Dr. Macdonald gave certain particulars as to the income and expenditure of the Board. The number of cases coming under the scheme was encouraging, and it was impossible to resist the conclusion that a sufficient number of cases would very quickly be forthcoming to put the scheme on a paying basis, so that he believed there was small likelihood of the guarantee which it was proposed to make ever being brought into requisition. He discussed certain objections which had been urged against the scheme. One was that its benefits were for one small section of the profession. But it should be remembered that this scheme might well be made a model on which other additional benefits under the National Insurance Act should be framed. The ophthalmic surgeons and practitioners who were in the scheme had shown their faith in it by consenting to two reductions of the capitation fee. Safeguarded in the way in which the Finance Committee proposed to safeguard it, he hoped that the guarantee would commend itself to the Council.

Mr. Bishop Harman said that the scheme had already proved a success in that it had staked out the claim of the profession to do work of this nature. If it had not been for this scheme the sight-testing optician would almost certainly have captured the position. He had not the slightest doubt that the scheme was going to fulfil all expectations, and both as Treasurer and as a member of the Ophthalmic Committee he heartily supported the proposal.

The Chairman pointed out three elements in the situation as it existed at the moment. The Government, which controlled the Army and Navy Approved Society, had lately directed that those entitled to ophthalmic benefit should obtain it by this scheme. In July next some of the agreements between approved societies and the sight-testing opticians would terminate. The societies were obliged during the currency of the agreements to send their cases to the opticians, but in July next some of them would be free to enter upon a different arrangement. The third thing was that the Government was considering the question of additional treatment benefits in general, and a number of approved societies were holding their hands until the Government's intentions were made known.

An amendment that the proposal be first referred to the Ophthalmic Committee for further consideration was defeated, 10 being in favour and 23 against, and the report of the Finance Committee embodying the recommendation was approved.

Employment of Pathologists at Hospitals.

Sir Richard Luce brought forward a matter which had been referred back to the Hospitals Committee for further consider-

tion when the Council, at its previous meeting, was discussing the terms and conditions of employment of pathologists at hospitals. It has been proposed, at the request of the Consulting Pathologists Group Committee, to insert a paragraph in the Association's Hospital Policy making the hospital responsible for the payment of a locumtenent during the absence owing to sickness or holiday leave of the pathologist. The Hospitals Committee now brought forward, after further consideration, the recommendation that the question of the payment of a locumtenent for a paid officer of a hospital was a matter for arrangement between the hospital and the officer concerned, in the light of the conditions of the particular appointment, and that as these conditions varied greatly in individual appointments no addition should be made to the Hospital Policy dealing generally with the situation.

Mr. Bishop Harman spoke against the new recommendation. He thought that a little help might well have been given here to the young pathologist. Sir Richard Luce replied that the Hospitals Committee was out to disencumber the Hospital Policy as far as possible, not to add a great many regulations and rules which were really outside its scope.

The recommendation was adopted.

On a second point referred back from the previous meeting, relating to the salary of an assistant pathologist, which the Group Committee had asked should be a fixed salary, Sir Richard Luce brought forward the reconsidered recommendation that, although it was desirable where an assistant pathologist was appointed to a hospital that the chief pathologist should be consulted in regard to the terms of employment of his assistant, there should not be any general statement in the Hospital Policy to the effect that assistant pathologists should be paid a fixed salary, as the conditions of employment varied greatly in individual appointments. The committee felt that it was unwise to fetter hospitals in their method of appointing assistant pathologists.

This also was agreed to.

In submitting the remainder of the report of the Hospitals Committee, Sir Richard Luce said that the committee had come to the conclusion that it would be necessary once more to set about the revision of the Hospital Policy, the special need for alteration arising, of course, in consequence of the Local Government Act. It was hoped to lay a report on the subject before the next meeting of Council.

Tests for Motor Drivers.

Dr. R. G. Gordon, vice-chairman of the special committee appointed to consider the question of tests for motor drivers, brought forward the committee's report. He stated that it was felt by the committee that as many of the recommendations proposed would go to the Ministry of Transport for discussion, it would be better for the present that they should be given publicity only in general terms. No particular evidence was brought forward that accidents were due to physical or mental defects on the part of the driver, but, on the other hand, there was no evidence that accidents were not due to such cause. It was felt undesirable that applicants for a licence to drive private cars should be presented with any complicated form of declaration, but the onus to declare a defect should be placed on the applicant, who should be asked to state in as brief and simple a manner as possible whether or not he was suffering from any of the diseases or disabilities specified in a list. Any applicant declaring himself to be so suffering should be referred to a medical examiner, who, after examination, would make a report having regard to certain standards, which were also set out in the recommendations. During the committee's deliberations the Road Traffic Bill was introduced into the House of Lords, and the committee had thereupon confined its attention almost entirely to the situation arising out of that bill. The conditions as to disease and disability set out in the proposed declaration were those which might be prescribed under Clause 5 of the measure. With regard to applicants for a licence in respect of a public service vehicle, the committee was of opinion that the medical examiner's report should be practically on the lines of that at present in use by the metropolitan police authority, which seemed to work pretty well in practice.

Certain inclusions in, and omissions from, the list of diseases and disabilities were discussed by the Council. It was noticed that deafness was not included among the disabilities, and on this Dr. Gordon replied that deafness did not appear to be a factor in driving a car, though it was most evidently a factor in the case of the pedestrian. Public service vehicles, the drivers of which had to hear what was said by their passengers, and the bell of the conductor, were, of course, in a different category; but the aurists on the committee seemed to feel that the matter, so far as the private motor car was concerned, did not interest them. Mr. Turner remarked that one of the best drivers in the country had been absolutely deaf since childhood.

Another subject which aroused discussion was the inclusion of alcoholism in the list of disabilities with regard to which a declaration must be made. One amendment was proposed substituting the phrase "under the influence of alcohol," but it was pointed out that no applicant was likely to confess to that, and that if the definition were widened the result would be to refuse licences to all but teetotallers.

All the recommendations were, with slight verbal amendments, agreed to. Mr. Turner said that the committee had been extremely fortunate in having had the co-operation of the Automobile Association, which represented so large a number of motor-car users. The secretary and deputy secretary of that body were present at the meetings, and afforded great assistance.

The Chairman said that the Council was indebted also to Professor Joseph Barcroft for his chairmanship of the committee. As Professor Barcroft was not a member of the Council it would be in order to accord him a vote of thanks for his services. Mr. Turner, in seconding the motion, said that Professor Barcroft presided over the committee in a most excellent manner; the committee could not have had a better chairman. The vote of thanks was accorded, and it was agreed that the Association should approach the Ministry of Transport in connexion with the decisions.

Medico-Political Action.

Three matters were brought forward by Dr. Bone, chairman of the Medico-Political Committee. The first was with regard to a recommendation of the Departmental Committee on Midwives, which suggested that a professional body should issue some pronouncement as to the advisability and place in labour of anaesthetics, and also of analgesics and sedative drugs in midwifery generally. Dr. Bone said that his committee was of opinion that this subject should be investigated by the Association, and that the Science Committee should be asked to consider and report. The Medical Secretary stated that an announcement had been made that a committee of the Royal College of Physicians had already reported to the College on the subject. Sir Robert Bolam thought that there was some value in going forward with the matter, though not quite in the form suggested. The Council decided to appoint a small special committee as follows: Sir Ewen Maclean, the chairman of the Science and Medico-Political Committees, Dr. Christine Murrell, Dr. W. H. F. Oxley, and four general practitioners representing town and country practices and doing midwifery work, the final choice to be left to the Chairman of Council.

Dr. Bone further stated that the Registrar-General had raised again the question of the period of time before death within which the certifying practitioner must have seen the deceased. Some years ago it was agreed that registrars should refer to the coroner (not necessarily for inquest) certificates of death in which the practitioner had not seen the deceased either after death or within fourteen days before death. The Registrar-General now stated that there seemed to be need for abbreviating the period to seven days, which would give increased security to the public. The feeling of the committee was that such a change would be irksome, particularly to the country doctor. After a brief discussion the proposal of the committee to send representatives to discuss the matter with the Registrar-General was approved.

The third matter was the question of cancer clinics instituted by local authorities. It appeared that there were such clinics at Greenwich, Leicester, and Willesden, but very few attendances were recorded, and it was the view of the committee that these clinics would probably die out, and that no action need be taken with regard to them. Dr. Bone, however, said that Dr. Wallace Henry had informed him that at Bradford there was a municipal clinic run on entirely different lines. These other clinics were for diagnostic and possibly treatment purposes, but the Bradford institution was a follow-up clinic, and was doing very useful work. Further information was being sought.

Dr. Bone, speaking as chairman of the General Medical Services Scheme Committee, reported that it had not yet been found possible to complete this committee's report, but this would be ready in time for the April meeting of the Council. As some parts of the report might prove to be contentious, and he was sure that the Council would desire to give full time to its consideration, the question of a special Council meeting seemed to arise. After a discussion of alternatives, the majority of the Council showed itself in favour of extending the ordinary meeting of the Council in April to two days instead of having a special meeting in March.

Other Committee Business.

Dr. Lewys-Lloyd, in reporting on matters dealt with by the Public Health Committee, said that the committee had not been inactive on the resolutions of the last Representative Meeting on the supply of Government lymph to practitioners. The present Minister of Health had not yet been able to give the question his attention. The committee was asking Sir George Newman under what conditions, if any, Government lymph could be made available to all practitioners who desired it and were willing to pay for it. The committee had also decided to approach the Ministry when a suitable opportunity occurred in regard to the central control of the medical services at present dealt with by the Board of Education. At its next meeting it would consider a report on how far education authorities had power to refer to their health committees the question of the health of school children. He also mentioned a number of public health and poor law appointments as to which questions had arisen.

The report of the Insurance Acts Committee, presented by Dr. Dain, dealt only with routine matters and matters in process of consideration.

Dr. G. A. Allan reported for the Scottish Committee, the report dealing only with the question of the reorganization of Branches and Divisions in Scotland. The view of the committee was that the area of a Division should coincide with the area of one or more local government units, and this obtained in Scotland, except in the Islands Division, where, in view of geographical difficulties, it was felt that the situation should remain as it was. Areas of Branches also generally coincided with those of one or more administrative counties, but in view of the probable development of the health services in Scotland along the lines of the five hospital regions, it seemed likely that ultimately it might be desirable to relate the areas of Scottish Branches to those regions. Permission was given by the Council for the calling of a conference of Scottish secretaries on the subject.

Dr. Baildon, acting for the chairman, Dr. Morton Mackenzie, who had to leave, brought forward a report of the Organization Committee, the only recommendation in which—agreed to unanimously—was that the Chairman of Council be authorized to forward a suitable letter to Dr. F. K. Smith, honorary secretary of the Aberdeen Branch, who has relinquished office, and whose services were considered to be deserving of special recognition.

Two office or internal matters were considered at some length. One of these was the question of the medical secretariat, in view of the retirement of Dr. Cox as from October, 1932. The other was the question of new type for the *British Medical Journal*. Some specimens of type were circulated, and the members of Council were asked to indicate their preference. Sir Robert Bolam said that the Journal Committee had attempted to meet criticisms and complaints which were made from time to time regarding the appearance of the text and illustrations in the *Journal*, but larger and more expensive remedies had to be sought if the matter was to be dealt with satisfactorily. The exigencies of the printing of the *Journal*, with its very large circulation, and the very large amount of matter which it contained, were not always appreciated. The committee had come to the conclusion that the provision of a broader-faced type was desirable. The expenditure involved would in any event be necessary in two or three years' time, because the matrices of the present linotype machines would require replacement, but in the meanwhile there was a widespread feeling that the legibility of the *Journal* should be improved. The Finance Committee had approved the necessary expenditure. The Council expressed its opinion as to the various specimens of type submitted, and the Journal Committee was authorized to proceed.

The Council rose at 7 p.m.

Association Notices.

ELECTION OF MEMBERS OF COUNCIL BY BRANCHES OUTSIDE THE BRITISH ISLES.

No nominations having been received with regard to the election of Members of Council for the following Groups of Branches it rests with the Council either again to invite nominations from members in the Branches in question, or itself to elect members to fill the vacancies.

Barbados, Bermuda, British Guiana, Grenada, Jamaica, Leeward Islands, St. Lucia, Trinidad and Tobago.

Assam, Baluchistan, Bombay, Burma, Calcutta, Ceylon, Hyderabad, Mesopotamia, Northern Bengal, Punjab, South Indian and Madras.

Hong Kong and China, Malaya.

The following is the position as regards the other Groups of Branches outside the British Isles:

Mr. T. P. DUNHILL, C.M.G. (London) (was elected for the three years 1928–31), South Australian, Tasmanian, Victorian, and Western Australian Branches.

Dr. G. CLARK TROTTER (London) (was elected for the three years 1928–31), New Zealand and Fiji Branches.

Dr. W. WATKINS-PITCHFORD (Bridgnorth, Salop) (was elected for the three years 1928–31), African Group of Branches.

NEW SOUTH WALES AND QUEENSLAND BRANCHES.

DR. R. J. A. BERRY (Westbury-on-Trym, Bristol), being the only candidate nominated by the New South Wales and Queensland Group of Branches, is hereby declared elected a Member of the Council of the Association for the unexpired portion of the period of office of the late Sir Jenner Verrall—namely, until the termination of the Annual Representative Meeting, 1931.

February, 1930.

PROPOSED RICHMOND DIVISION.

NOTICE is hereby given by the Council of the Association to all concerned, of the following proposal made by the Surrey Branch:

That a Richmond Division of the Surrey Branch be formed, of area consisting of Richmond municipal borough and Barnes and Ham urban districts; the area of the Kingston-on-Thames Division being modified accordingly.

Written notice of the proposal has been given by the Council to the Kingston-on-Thames Division, and the matter will be duly decided by the Council. Any member affected by the proposal, and objecting thereto, is requested to notify the Medical Secretary, not later than March 15th, 1930, of such objection, and the reason therefor.

ALFRED COX,
Medical Secretary.

Feb. 8th, 1930.

BRANCH AND DIVISION MEETINGS TO BE HELD.

BIRMINGHAM BRANCH: NUNEATON AND TAMWORTH DIVISION.—A meeting of the Nuneaton and Tamworth Division will be held at the Tamworth General Hospital on Thursday, February 20th. Mr. F. Douglas Marsh will discuss nasal infections.

BORDER COUNTIES BRANCH.—A general meeting of the Border Counties Branch will be held at the County Hotel, Carlisle, on Thursday, February 20th, at 6.30 p.m. A British Medical Association Lecture will be delivered by Sir James Barr, entitled "The preservation of a healthy and efficient circulatory system, from childhood to advanced age." The meeting will be followed by a Branch dinner, to which ladies are invited. Members of other Branches and Divisions will be welcomed, and particulars of the dinner will be sent on application to the honorary secretary, Dr. G. T. Willan, 3, Goschen Road, Carlisle.

EDINBURGH BRANCH.—The winter clinical meeting of the Edinburgh Branch will be held in the Royal Infirmary, Edinburgh, on Wednesday, February 26th, at 3.15 p.m. All members of the profession are cordially invited. Senior medical students desirous of attending will be admitted by card, obtainable from Mr. W. A. Cochrane. The museum will be open from 10 a.m. to 6 p.m. Arrangements will be made for holding special clinics during the day. Dinner at 7 p.m. in the B.M.A. House, Drumsheugh Gardens; morning dress. (Dinner tickets 8s.) Ladies accompanying members will be cordially welcomed. Members of the Branch are requested to notify, not later than February 22nd, whether or not they intend to be present, and whether they will be accompanied by ladies or other guests.

GLASGOW AND WEST OF SCOTLAND BRANCH: GLASGOW DIVISION.—A meeting of the Glasgow Division will be held in the Faculty Hall, 242, St. Vincent Street, on Wednesday, February 19th, at 8.15 p.m.

LANCASHIRE AND CHESHIRE BRANCH: GLOSSOP DIVISION.—The annual meeting of the Glossop Division will be held at the Norfolk Hotel, Glossop, on Friday, February 21st, at 9 p.m. It will be preceded by a dinner.

LANCASHIRE AND CHESHIRE BRANCH: HYDE DIVISION.—A meeting of the Hyde Division will be held in the Hyde Town Hall on Wednesday, February 19th, at 8.30 p.m., when a demonstration-address will be given by Sir Robert Jones.

LANCASHIRE AND CHESHIRE BRANCH: ROCHDALE DIVISION.—A meeting of the Rochdale Division will be held at the Rochdale Infirmary on Wednesday, March 12th, at 8.30 p.m. Mr. R. Ollerenshaw, honorary orthopaedic surgeon, Salford Royal Hospital, will give a lecture on manipulative surgery.

LANCASHIRE AND CHESHIRE BRANCH: WIGAN DIVISION.—The Wigan Division will hold a hot-pot supper this evening (Friday, February 14th). Dr. G. B. Charnock will read a paper on the diagnosis of tuberculous hip.

METROPOLITAN COUNTIES BRANCH: CAMBERWELL DIVISION.—A clinical meeting of the Camberwell Division will be held at the Bermondsey and Rotherhithe Hospital on Tuesday, February 25th, at 9 p.m.

METROPOLITAN COUNTIES BRANCH: CITY DIVISION.—A clinical meeting of the City Division, in conjunction with the Æsculapian Society, will be held at the Metropolitan Hospital to-day (Friday, February 14th), at 4.30 p.m., when Mr. Acton Davis will demonstrate cases.

METROPOLITAN COUNTIES BRANCH: FINCHLEY DIVISION.—A meeting of the Finchley Division will be held at the Finchley Memorial Hospital on Tuesday, February 18th, at 8.45 p.m. Dr. L. E. H. Whitby will give an address on the laboratory and the practitioner.

METROPOLITAN COUNTIES BRANCH: LEWISHAM DIVISION.—The medical practitioners of the borough of Lewisham propose to give a dinner and presentation to Dr. Ivor Lewis as a mark of appreciation for his valuable services at Lewisham Hospital for the past seven years. The dinner will be held at Chiesman's Restaurant, Lewisham, S.E.13, on Wednesday, February 26th, at 8.15 for 8.30 p.m. (tickets 8s. 6d., exclusive of wines). Ladies are cordially invited Evening dress. Subscriptions to the presentation fund should be sent to the honorary secretary (Dr. C. J. B. Buchan, 267, Baring Road, Grove Park, S.E.12); the suggested minimum is five shillings.

METROPOLITAN COUNTIES BRANCH: NORTH MIDDLESEX DIVISION.—A meeting of the North Middlesex Division will be held on Wednesday, February 26th. Dr. G. Grant Macdonald will read a paper on the management of normal labour.

METROPOLITAN COUNTIES BRANCH: STRATFORD DIVISION.—A meeting of the Stratford Division will be held in the Town Hall, Ilford, on Tuesday, February 18th, at 9.15 p.m. Mr. A. J. Couzens (surgeon, Ilford Emergency Hospital and Queen Mary's Hospital, Stratford) will give an address entitled "Fractures: simple and complicated by lawyers and others."

METROPOLITAN COUNTIES BRANCH: WILLESDEN DIVISION.—A meeting of the Willesden Division will be held at the Willesden General Hospital, Harlesden Road, on Thursday, February 20th, at 9 p.m. Dr. J. Stanley White will give an address on how biological products are made, which will be illustrated by a cinematograph film and lantern slides.

MIDLAND BRANCH: CHESTERFIELD DIVISION.—A meeting of the Chesterfield Division will be held at the Maternity Hospital to-day (Friday, February 14th), at 8.15 p.m. Mr. Ernest Finch, honorary surgeon to the Sheffield Royal Infirmary, will give an address on enlarged prostate.

MIDLAND BRANCH: HOLLAND DIVISION.—A meeting of the Holland Division will be held at the White Hart Hotel, Spalding, on Friday, February 28th, at 3 p.m. Dr. J. Strickland Goodall will give a British Medical Association Lecture on recent advances in the diagnosis and treatment of cardiac affections, together with a demonstration of the portable electro-cardiograph.

NORTH OF ENGLAND BRANCH.—The annual dinner of the North of England Branch will be held at the Central Station Hotel, Newcastle-on-Tyne, on Thursday, March 20th, at 7.30 p.m. Dr. T. Eustace Hill (president of the Branch, 1921-22, and medical officer of health for the county of Durham) will be the guest of the evening. Application for tickets (price 10s. 6d.) should be sent to the honorary secretary, Mr. Norman Hodgson, 7, Windsor Terrace, Newcastle-on-Tyne.

NORTH OF ENGLAND BRANCH: DURHAM DIVISION.—The next meeting of the Durham Division will take place on Tuesday, February 18th.

NORTH OF ENGLAND BRANCH: TYNESIDE DIVISION.—A meeting of the Tyneside Division will be held on Thursday, February 20th, at 8.15 p.m. Mr. G. Grey Turner will give an address on indications for operation and some considerations pertaining to their results.

SOUTHERN BRANCH: JERSEY DIVISION.—A meeting of the Jersey Division will be held at the General Hospital on Thursday, February 20th. Mr. A. C. Halliwell will read a paper on radium treatment for malignant disease.

SOUTHERN BRANCH: PORTSMOUTH DIVISION.—The following arrangements for future meetings have been made:

Mar. 14th. Sir Thomas Horder.
April 3rd. Clinical Meeting arranged by Mr. Ridout.
April 10th. Dr. Beaton.

SOUTH WALES AND MONMOUTHSHIRE BRANCH: CARDIFF DIVISION.—The annual dinner of the Cardiff Medical Society will be held on Tuesday, February 18th, not Wednesday, February 12th, as previously announced.

SOUTH WALES AND MONMOUTHSHIRE BRANCH: SWANSEA DIVISION.—A meeting of the Swansea Division will be held at the Hotel Metropole, Swansea, on Thursday, February 27th, at 7.30 p.m., to be followed by a supper. Dr. Charles Bolton will deliver a British Medical Association Lecture on the relation of medicine to surgery in the treatment of gastric and duodenal ulcers.

SOUTH-WESTERN BRANCH: WEST CORNWALL DIVISION.—A meeting of the West Cornwall Division will be held in the Royal Cornwall Infirmary, Truro, on Tuesday, February 18th, at 3 p.m. Agenda: Cornwall Education Committee's comprehensive scheme for the provision of school medical services (Dr. E. M. Clarke, county medical officer of health, will attend and explain the scheme); to consider a resolution passed by the South-Western Branch: "That this Branch adopts the principle (as expressed in the Hospital Policy of the Association) of the deduction, for the purpose of a medical staff fund, of a percentage of all moneys paid to a hospital under a hospital contributory scheme"; tea.

SUFFOLK BRANCH: WEST SUFFOLK DIVISION.—The annual meeting of the West Suffolk Division will be held at the West Suffolk General Hospital, Bury St. Edmunds, on Tuesday, February 18th, at 3 p.m.

SURREY BRANCH: CROYDON DIVISION.—A meeting of the Croydon Division will be held at the Croydon General Hospital on Tuesday, February 18th, at 8.30 p.m. Mr. W. H. Trethowan will give an address on some common orthopaedic conditions occurring in general practice.

SURREY BRANCH: REIGATE DIVISION.—A meeting of the Reigate Division will be held at the East Surrey Hospital on Tuesday, February 18th, at 8.45 p.m. Dr. J. A. Drake will read a paper on skin diseases in children.

SUSSEX BRANCH: BRIGHTON DIVISION.—A clinical meeting of the Brighton Division will be held at the Sussex Eye Hospital on Thursday, February 20th, preceded by a short business meeting for the election of deputy representatives, and a ten-minute address by Dr. Graham-Bonnalie on the treatment of rheumatism by stock vaccines.

YORKSHIRE BRANCH: BRADFORD DIVISION.—A meeting of the Bradford Division will be held on Wednesday, February 26th. Dr. C. J. Young will give an address on vaccines.

Meetings of Branches and Divisions.

HERTFORDSHIRE BRANCH: WATFORD AND ST. ALBANS DIVISIONS.

A COMBINED meeting of the Watford and St. Albans Divisions and the Watford and West Herts Medical Society was held in the Council Chamber, Watford, on January 15th, when Dr. C. HERBERT HALL was in the chair and thirty-three members were present.

The question of the new ophthalmic service was considered. Dr. AVELING objected to the principle of making a fixed fee of half a guinea, and said it was setting a bad precedent; Dr. WILLIAMSON also spoke. It was decided by unanimous consent to send the following resolution to headquarters:

> That in the opinion of the meeting of the Watford and St. Albans Divisions of the British Medical Association the fee of half a guinea for eye examinations under the National Ophthalmic Treatment Board's scheme is inadequate, and that every effort should be made by the British Medical Association to overcome the unfair competition of the prescribing opticians, and that it is wrong in principle that the medical men should be so exploited.

The CHAIRMAN then introduced Dr. H. HYSLOP THOMPSON, the county medical officer of health, who opened the discussion on the medical implications in connexion with the Local Government Act, 1929. Dr. W. PORTER spoke next, and dwelt particularly on the point of view of the infirmaries. Several of those present took part in the subsequent discussion, and Drs. THOMPSON and PORTER answered questions. The meeting ended with a cordial vote of thanks.

MIDLAND BRANCH: HOLLAND DIVISION.

A MEETING of the Holland Division was held at the White Hart Hotel, Boston, on January 31st, when Dr. J. M. KING was in the chair.

The scale of fees for public vaccinators, as proposed by the Holland County Council, was fully discussed, and the following resolution was unanimously adopted:

> That in the opinion of this meeting of the Holland Division of the British Medical Association the scale of fees for public vaccinators proposed by the Holland County Council should be accepted, with the reservation that mileage for visits to inaccessible places should be calculated as in the case of the National Health Insurance Act.

SOUTH WALES AND MONMOUTHSHIRE BRANCH: SOUTH-WEST WALES DIVISION.

A VERY successful meeting of the South-West Wales Division was held on January 22nd at the Carmarthenshire Infirmary, Carmarthen, when Professor G. F. STILL (London) gave a British Medical Association Lecture on common fallacies in diseases of children. Despite depressing climatic conditions, twenty-five members were present to hear the lecturer, who was introduced by Dr. ABRAHAM THOMAS, the chairman.

Professor STILL referred particularly to acute pyelitis in childhood. He laid particular stress on the necessity of the discovery of pus cells in the urine in these cases, and gave advice about the best ways to obtain specimens from infants. He then passed to acidosis and cyclical vomiting, emphasizing the great difficulty in some cases in arriving at a differential diagnosis. He particularly urged his hearers not to be misled into diagnosing acidosis by the presence of acetonuria without first excluding any other diseases which might be present and be overlooked. He closed his lecture with remarks on dietetics in children, and made special reference to vitamins, criticizing the indiscriminate use of these substances.

At the close of the lecture questions were asked by many members, to which Professor STILL replied.

On the motion of Dr. D. PHILLIPS, seconded by Dr. W. A. T. LLOYD, a very hearty vote of thanks was accorded with acclamation to Professor Still, who briefly replied.

After the meeting tea was served at the Infirmary.

SOUTH-WESTERN BRANCH: TORQUAY DIVISION.

A WELL-ATTENDED meeting of the Torquay Division was held in the Torbay Hospital on January 15th, under the chairmanship of Dr. P. A. MCCALLUM.

The chief item on the agenda was the consideration of the hospital policy of the Association, with special reference to the payment of the medical staffs of the voluntary hospitals in the area of the Division. Representatives of several hospitals spoke on the subject, and after a good discussion it was agreed to circularize all the hospitals concerned and obtain a definite expression of opinion from their medical staffs to facilitate reconsideration of the matter at a future meeting.

The effort made by the Executive Committee to obtain guidance on the interpretation of the Nursing Homes Registration Act, 1927, was explained to the meeting: no action had been possible, since no reply had yet been received to the letter sent to the Minister of Health.

The meeting was informed of the steps being taken by the town council, at the instigation of the Division, to provide increased accommodation for cases of non-notifiable infectious diseases among visitors to the town.

It was reported that another case had occurred where the lack of adequate and decent facilities for post-mortem examinations had caused considerable distress and annoyance to the relatives of a lady visitor who had died suddenly in Torquay. Several members spoke strongly on the subject. The honorary secretary was instructed to bring the matter to the notice of the town clerk again, and to ask how this matter now stood.

SURREY BRANCH: CROYDON DIVISION.

A MEETING of the Croydon Division was held at the Croydon General Hospital on January 21st, when Dr. ALEX ROSE, chairman of the Division, presided, and thirty-four members were present.

The question of raising funds for the medical charities was discussed, and it was resolved that an endeavour should be made to arrange a dance after the summer.

Drs. P. W. Hamond and C. G. C. Scudamore were appointed representatives, and Mr. E. M. Cowell and Dr. G. E. E. Brayne-Nicholl deputy representatives in the Representative Body.

Dr. GERTRUDE DEARNLEY gave an address on the treatment of gynaecological cases by radium. Several members took part in the discussion which followed, and on the proposition of Dr. R. L. PINKERTON a hearty vote of thanks was accorded to the lecturer.

SUSSEX BRANCH: BRIGHTON DIVISION.

A CONJOINT meeting of the Brighton Division and Sussex Law Society was held at the Dispensary, Queen's Road, Brighton, on January 23rd, when Dr. L. A. PARRY, chairman of the Division, was in the chair.

Dr. G. C. ANDERSON, Deputy Medical Secretary, delivered a very interesting address on unqualified practice to an audience of forty doctors and lawyers. In his address Dr. Anderson dealt with the various forms of charlatanry which had proved so successful from the charlatan's point of view up to the present day, and explained the theories of the various "paths" and "practors." A discussion followed, in which seven members took part. On the motion of Mr. A. C. BORLASE (Brighton), seconded by Dr. DONALD HALL, a hearty vote of thanks was accorded to Dr. Anderson for his interesting address.

At a meeting of the Division held on January 30th, under the chairmanship of Dr. PARRY, Dr. E. Rowland Fothergill (Hove), Dr. L. A. Parry (Hove), and Dr. Pringle Morgan (Seaford) were elected the representatives of the Division for the Annual Representative Meeting in 1930.

It was unanimously decided that a most hearty and cordial invitation be given to the Association to hold its annual conference at Brighton at an early date.

Dr. PARRY reported that as the result of the dance arranged by the Division on December 20th a cheque for over £90 would be shortly forwarded to headquarters for the B.M.A. Charities Fund. He also stated that the Powell Appeal Fund, amounting to £622, had been closed.

After the business meeting Mr. R. BROOKE gave an address on the internal derangement of the knee-joint, illustrated by a cinematograph film, which was much appreciated by the thirty-eight members present. Mr. Brooke was especially congratulated by Mr. J. R. GRIFFITH on the excellence of the colour contrasts in his film, which enabled the onlooker to follow perfectly the various steps in the operative technique. Mr. Griffith suggested that it would be a good thing if members of the Division who were expert photographers could form a section for the purpose of helping one another when it was desired to make a film of any particular operation or interesting case.

On the motion of Mr. J. H. TURTON, seconded by Mr. C. GIBSON (Worthing) a very hearty vote of thanks was accorded to Mr. Brooke for his address.

YORKSHIRE BRANCH: SCARBOROUGH DIVISION.

THE annual general meeting of the Scarborough Division was held at the Pavilion Hotel on January 30th, when there was a good attendance.

The following officers were elected for the year:

Chairman, Dr. E. O. Libbey. *Vice-Chairman*, Dr. W. S. Robertson. *Honorary Secretary*, Dr. Guy Thompson. *Representative in Representative Body*, Dr. Candler Hope.

Mr. FLINT (Leeds) delivered a lecture on jaundice.

Hearty votes of thanks were accorded to the retiring officers, and to Dr. Candler Hope for his continued help in the Annual Representative Body.

MENTAL TREATMENT BILL, 1929.

VIEWS OF THE ROYAL MEDICO-PSYCHOLOGICAL ASSOCIATION.

AFTER full consideration of the report of a special subcommittee, and of the Mental Treatment Bill as brought from the Lords on December 20th, 1929, the Parliamentary Committee of the Royal Medico-Psychological Association has come to the following conclusions, which are set out in a leaflet:

"The bill, taken as a whole, shows a welcome advance as to the treatment of mental illness. It adheres to the general principles the association has already laid down as regards voluntary boarders.

"The committee is strongly of the opinion that the medical element in the reconstructed Board of Control should be considerably strengthened.

"The committee thinks that the word 'boarder,' as used in the bill, is inappropriate, and that it should be replaced by 'patient.' Such a substitution would tend to establish the proper professional relationship of doctor to patient—so very desirable in medical treatment.

"The committee has always taken exception to the use of the word 'temporary' both as regards patients and their treatment. Its use in mental cases implies that the patient should really be dealt with under the principal Act as a person of unsound mind, and that, as a favour, such is postponed if recovery may be expected within a stated period. This, the committee submits, is not the proper approach. The Royal Commission has laid it down, as many have done before, that certification should be the last resort, and the occasion for the last resort is the refusal of such a patient to enter an institution for the care and treatment thought necessary. A 'non-volitional' mental case has not refused treatment, and should not be dealt with as a possible candidate for certification until this necessity arises. 'Treatment' without qualification and 'non-volitional' patient should therefore be used throughout the bill, and lines 26 and 27 of Part II, Schedule I, appropriately amended.

"The amendments made in the bill during its passage through the House of Lords were largely those the committee thought desirable. This refers chiefly to the alteration of age in Clause 1, Sub-clause 2; the requirement of a medical certificate in the case of boarders under 16 years of age; the addition of Sub-clause 13 to Clause 5, extending the possible period of treatment to twelve months, and of Sub-clause 16, which gives the same protection to the property of persons under temporary treatment as to those under an inquisition or under reception order."

A number of detailed amendments are recommended by the committee in regard to voluntary boarders and temporary patients, and in regard to the composition of the Board of Control. The committee is of the opinion that the bill should guarantee the medical strength on the Board, and that the Board's medical officers should be at least equal in number to the lay officers. "As the bill stands at present it is possible to have only one medical man in the whole department—that is, one senior commissioner. All the rest might be lay persons. Sufficient adequately paid commissioners (not assistant commissioners) should be provided for the statutory visitations of the mental institutions."

The Parliamentary Committee's report was approved by the council of the association on February 4th.

National Insurance.

WARWICKSHIRE PANEL AND LOCAL MEDICAL COMMITTEE.

AT a meeting of this committee, held at Coventry on January 23rd, with Dr. HERBERT MALINS in the chair, correspondence with volunteers who had been keeping the requisite statistical data concerning insurance visitation, mileage, etc., was reported, a satisfactory number being willing to continue in the current year. Difficulties incidental to the introduction of the *National Formulary* were discussed, the formulary appearing, however, to have given general satisfaction. Exception was taken to the dosage of 5 minims in mist. strophanth. as being too high for indiscriminate use. It was decided to ask the Ministry of Health to sanction the payment from the reserved portion of the Special Mileage Fund of the fees incidental to approved post-graduate courses held in Birmingham.

It was reported that a local Insurance Committee had required production of deeds on the occasion of being notified that a practitioner had taken a partner. In view of the definition in the Regulations of a partner as a principal entitled to a share of profits not less than one-third of the share of any other partner, the doctor was advised to give that authenticated assurance to the Insurance Committee, which the Panel Committee considered all that was requisite.

Naval and Military Appointments.

ROYAL NAVAL MEDICAL SERVICE.

Surgeon Rear-Admiral W. L. Martin is placed on the retired list at his own request.

Surgeon Lieutenants J. W. Nesbitt to the *Courageous*; C. Keating to the *Vivid* for R.N. Hospital, Plymouth.

ROYAL ARMY MEDICAL CORPS.

Lieut.-Colonel R. C. Wilson retires on retired pay.

Lieut.-Colonel and Brevet Colonel J. S. Bostock, C.B.E., to be Commandant Royal Army Medical College.

Lieut.-Colonel D. Ahern, D.S.O., to be Brevet Colonel.

The following Majors to be Lieutenant-Colonels: G. W. W. Ware, D.S.O., vice Lieut.-Colonel R. C. Wilson to retired pay; C. J. Wyatt, vice Lieut.-Colonel H. St. M. Carter, D.S.O., to half pay.

Major R. E. U. Newman, O.B.E., M.C., to be Brevet Lieutenant-Colonel.

ROYAL AIR FORCE MEDICAL SERVICE.

The following Flying Officers are promoted to the rank of Flight Lieutenant: B. B. Kennedy, J. Kemp, J. B. Murphy, R. F. MacLatchy, and J. J. Quinlan.

INDIAN MEDICAL SERVICE.

Lieut.-Colonel F. E. Wilson, an Agency Surgeon, on return from leave, is posted as Residency Surgeon, Kashmir.

Major A. N. Palit to be Lieutenant-Colonel.

Captain J. W. F. Albuquerque to be Major.

TERRITORIAL ARMY.

ROYAL ARMY MEDICAL CORPS.

Captain C. Helm, D.S.O., M.C. (Lieutenant-Colonel, Reserve of Officers), to be Major.

Captain D. C. Bowie, R.A.M.C., vacates the appointment of Divisional Adjutant, 54th (East Anglian) Division.

Lieutenants to be Captains: A. O'Hanlon and H. A. C. Gregory, M.C.

TERRITORIAL ARMY RESERVE OF OFFICERS: ROYAL ARMY MEDICAL CORPS.

Lieutenant A. MacPherson, from the active list, to be Lieutenant.

COLONIAL MEDICAL SERVICES.

The following new appointments have been made during January: Dr. R. G. Spink, Health Officer, Malayan Medical Service; Drs. B. A. Taylor and E. D. B. Wolfe, Medical Officers, Malayan Medical Service; Dr. D. R. Griffith, Medical Officer, Prince of Wales School and College, Achimota, Gold Coast; Miss D. E. Stewart, M.D., Lady Medical Officer, Gold Coast; Dr. J. D. Robertson, Medical Officer, Kenya; Dr. R. Shelley, Medical Officer, Straits Settlements; Drs. E. Burton and D. Murray, Medical Officers, Uganda; Dr. A. Gaston, Medical Officer, West African Medical Staff, Nigeria.

VACANCIES.

ABERGELE SANATORIUM, North Wales.—Temporary Medical Superintendent. Remuneration £15 15s. per week.

ACCRINGTON VICTORIA HOSPITAL.—House-Surgeon. Salary £150 per annum.

BEDFORD COUNTY HOSPITAL.—House-Surgeon (male, unmarried). Salary £175 per annum.

BIRKENHEAD GENERAL HOSPITAL.—(1) Senior House-Surgeon. (2) House-Physician. Males. Salary £150 and £100 per annum respectively.

BIRMINGHAM AND MIDLAND HOSPITAL FOR WOMEN.—House-Surgeon. Salary £75 per annum.

BRADFORD: MUNICIPAL GENERAL HOSPITAL, St. Luke's.—(1) House-Physicians. (2) House-Surgeons. Salary £200 per annum.

CANCER HOSPITAL, Fulham Road, S.W.3.—House-Surgeon. Salary £100 per annum.

CARDIFF ROYAL INFIRMARY.—House-Surgeon to the Ophthalmic Department. Salary £75 per annum.

CHESTER ROYAL INFIRMARY.—House-Surgeon (male). Salary £150 per annum.

CUMBERLAND INFIRMARY, Carlisle.—(1) House-Surgeon. (2) House-Physician. (3) House-Surgeon to Special Departments. Males. Salary for (1) £175 and for (2) and (3) £155 per annum.

CUMBERLAND AND WESTMORLAND JOINT MENTAL HOSPITALS.—Deputy Medical Superintendent. Salary £500 per annum, rising to £600, with additional £50 on obtaining D.P.M.

DERBYSHIRE EDUCATION COMMITTEE.—(1) Assistant School Medical Officer (male). (2) Assistant School Dental Officers. Salary for (1) £600 per annum, rising to £700, and for (2) £450 to £500 per annum.

DEWSBURY COUNTY BOROUGH.—Deputy School Medical Officer and Deputy Medical Officer of Health. Salary £600 per annum.

DURHAM COUNTY COUNCIL.—Deputy County Medical Officer of Health (male). Salary £1,000 per annum, rising to £1,200.

EAST HAM MEMORIAL HOSPITAL, Shrewsbury Road, E.7.—Honorary Assistant Ophthalmic Surgeon.

ECCLES AND PATRICROFT HOSPITAL, near Manchester.—Senior House-Surgeon. Salary £150 per annum.

EVELINA HOSPITAL FOR CHILDREN, Southwark, S.E.—Surgeon to Out-patients, honorary.

GLOUCESTER COUNTY AND CITY MENTAL HOSPITALS.—Medical Superintendent. Salary £1,100 per annum.

GOLDEN SQUARE THROAT, NOSE AND EAR HOSPITAL, W.1.—House-Surgeon (male). Salary £100 per annum.

GREAT YARMOUTH: GENERAL HOSPITAL.—Senior House-Surgeon (male, unmarried). Salary £150 per annum.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.1.—(1) House-Surgeon. (2) House-Physician. Salary £100 per annum each.

HULL ROYAL INFIRMARY.—Casualty House-Surgeon (male). Salary £130 per annum.

IPSWICH: EAST SUFFOLK AND IPSWICH HOSPITAL.—(1) Casualty Officer. (2) House-Surgeon. Salary £150 and £120 per annum respectively.

KENT COUNTY OPHTHALMIC AND AURAL HOSPITAL, Maidstone.—House-Surgeon (male) to the Ear, Nose, and Throat Department. Salary £200 per annum.

LEICESTER: CITY MENTAL HOSPITAL, Humberstone.—Third Assistant Medical Officer and Assistant Pathologist (male, unmarried). Salary £550 per annum, with additional £50 if holding D.P.M.

LEICESTER ROYAL INFIRMARY.—(1) House-Surgeons. (2) House-Physicians. Salary £125 per annum each.

LIVERPOOL STANLEY HOSPITAL.—(1) Male House-Physician. (2) Two Male House-Surgeons. (3) Female Gynaecological House-Surgeon. Salary £100 per annum each.

MACCLESFIELD GENERAL INFIRMARY.—Second House-Surgeon. Salary £150 per annum.

MAIDSTONE: WEST KENT GENERAL HOSPITAL.—House-Surgeon (male). Salary £220 per annum.

MANCHESTER AND SALFORD HOSPITAL FOR SKIN DISEASES.—House-Surgeon. Salary £100 per annum.

MANCHESTER UNION.—Fourth Assistant Resident Medical Officer at the Booth Hall Infirmary for Children. Salary £250 per annum.

MANSFIELD AND DISTRICT HOSPITAL.—House-Surgeon (male). Salary £150 per annum, rising to £175 after six months.

MIDDLESBROUGH: NORTH ORMESBY HOSPITAL.—House-Physician (male, unmarried). Salary £120 per annum.

MIDDLESBROUGH: NORTH RIDING INFIRMARY.—(1) Senior House-Surgeon. (2) Second House-Surgeon. Males. Salary £200 and £150 per annum respectively.

MIDDLESBROUGH UNION.—Assistant Resident Medical Officer at Holgate Hospital. Salary £6 6s. per week.

NATIONAL HOSPITAL FOR DISEASES OF THE HEART, Westmoreland Street, W.1.—Resident Medical Officer (male). Salary £150 per annum.

NEWCASTLE-UPON-TYNE CITY MENTAL HOSPITAL, Gosforth.—Junior Assistant Medical Officer (male). Salary £350 per annum, rising to £450, with additional £50 on obtaining D.P.M.

NORTHERN RHODESIA: ROAN ANTELOPE COPPER MINES, LIMITED.—Junior Medical Officer. Salary £900-£1,000 per annum.

PLYMOUTH ROYAL EYE INFIRMARY.—Honorary Surgeon.

PORTSMOUTH PARISH.—Third Assistant Resident Medical Officer at St. Mary's Hospital, Institution, and Children's Home. Salary £250 per annum.

QUEEN CHARLOTTE'S MATERNITY HOSPITAL, Marylebone Road, N.W.1.—(1) Assistant Resident Medical Officer (male); salary £80 per annum, rising to £100 on appointment as Senior. (2) Resident Anaesthetist; salary £80 per annum. (3) District Resident Medical Officer; salary £80 per annum.

RICHMOND, SURREY: ROYAL HOSPITAL.—Junior House-Surgeon (male). Salary £100 per annum.

ROYAL NATIONAL ORTHOPAEDIC HOSPITAL, 234, Great Portland Street, W.1.—Two House-Surgeons. Salary £150 per annum.

ROYAL WATERLOO HOSPITAL FOR CHILDREN AND WOMEN, Waterloo Road, S.E.—House-Physician (male). Salary £100 per annum.

ST. JOHN'S HOSPITAL, Wandsworth, S.W.18.—Second Assistant Resident Medical Officer (male, unmarried). Salary £400 per annum.

ST. PETER'S HOSPITAL FOR STONE, etc., Henrietta Street, W.C.2.—House-Surgeon (male). Salary £75 per annum.

SALFORD ROYAL HOSPITAL.—House-Surgeon (male) attached to the Orthopaedic Department. Salary £125 per annum.

SEAMEN'S HOSPITAL SOCIETY.—Physician with charge of out-patients at Dreadnought Hospital, Greenwich.

SHEFFIELD: JESSOP HOSPITAL FOR WOMEN.—Assistant House-Surgeon (male). Salary £100 per annum.

SHEFFIELD ROYAL INFIRMARY.—Assistant Casualty Officer. Salary £80 per annum, rising to £100 after six months.

SHROPSHIRE ORTHOPAEDIC HOSPITAL AND AGNES HUNT SURGICAL HOME, Oswestry.—House-Surgeon (male). Salary £200 per annum.

STAFFORDSHIRE GENERAL INFIRMARY, Stafford.—(1) House-Surgeon. (2) House-Physician. Salary £200 and £150 per annum respectively.

STIRLING DISTRICT MENTAL HOSPITAL, Larbert.—Junior Assistant Medical Officer (male). Salary £200 per annum.

TAUNTON AND SOMERSET HOSPITAL.—Junior House Medical Officer (male). Salary £100 per annum.

TIVERTON HOSPITAL.—House-Surgeon. Salary £100 per annum.

TRURO: ROYAL CORNWALL INFIRMARY.—House-Surgeon. Salary £170 per annum.

WEST BROMWICH AND DISTRICT GENERAL HOSPITAL.—(1) House-Surgeon. (2) House-Physician. (3) Casualty House-Surgeon. Males (unmarried). Salary £200 per annum each.

WEST LONDON HOSPITAL, Hammersmith Road, W.6.—(1) House-Physician. (2) Two House-Surgeons. (3) Resident Anaesthetist. Salary £100 per annum.

WHITEHAVEN AND WEST CUMBERLAND HOSPITAL.—Junior House-Surgeon (male). Salary £100 per annum, rising to £150 on becoming Senior.

YORK CITY HOSPITALS.—Resident Medical Officer at the Maternity Hospital and Sanatorium. Salary £350 per annum.

CERTIFYING FACTORY SURGEONS.—The following appointments at Bodmin (Cornwall) and Ross (Hereford) are vacant. Applications to the Chief Inspector of Factories, Home Office, Whitehall, S.W.1.

MEDICAL REFEREES UNDER THE WORKMEN'S COMPENSATION ACT, 1925, for (1) the Districts of Chard, Langport, Taunton, Wellington, and Williton County Courts (Circuit No. 57). (2) Midlothian County (Sheriffdom of the Lothians and Peebles). Applications for (1) to the Private Secretary, Home Office, Whitehall, S.W.1, by March 1st, and for (2) to the Private Secretary, Scottish Office, Whitehall, S.W.1, by March 3rd.

This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column advertisements must be received not later than the first post on Tuesday morning.

APPOINTMENTS.

BEATTIE, Neil R., M.D., B.S., B.Hy., D.P.H.Durh., Medical Officer, Ministry of Health.

HARDIE, David, *M.C.*, M.B., Ch.B., F.R.C.S.Ed., D.O.Oxon., D.O.M.S.Lond., Honorary Assistant Ophthalmic Surgeon, Royal Victoria and West Hants Hospital, Bournemouth.

TURNER, Cyril E. H., M.R.C.S., L.R.C.P., Assistant Resident Officer, Poplar Hospital for Accidents.

CERTIFYING FACTORY SURGEONS.—M. J. Hilton, M.B., B.S.Durh., for the Camberwell District (London); G. P. O'Donnell, M.B., B.Ch., B.A.O. N.U.I., for the Redruth District (Cornwall).

DIARY OF SOCIETIES AND LECTURES.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, W.C.—Mon., 5 p.m., Mr. R. H. O. B. Robinson: The Role of Short Circuit Operations in the Treatment of Cholecystitis. Wed., 5 p.m., Mr. W. McAdam Eccles: Anatomy, Orthodox, and Heterodox, in Relation to Surgery. Fri., 5 p.m., Mr. E. R. Flint: The Association between Gall-bladder Lesions and Hepatitis in the Human Subject.

ROYAL SOCIETY OF MEDICINE.

General Meeting of Fellows.—Tues., 5.30 p.m., Ballot for Election to the Fellowship.

Section of Pathology.—Tues., 8 p.m., E. R. Cullinan: A case of Tuberculosis of the Stomach; A. Fleming and I. H. McLean: The Occurrence of Influenza Bacilli in the Mouth; T. H. C. Benians: Treatment of Cases of Acute Osteomyelitis with Benzol, with the Object of Diminishing the Leucocytosis; W. W. C. Topley: Antibodies in Rabbits. Demonstration by W. G. Barnard: Haemangeioma of the Cerebrum.

Section of Dermatology.—Thurs., 4 p.m., Cases.

Section of Balneology and Climatology.—Fri., 5 p.m., Discussion: Bath Reaction in Spa Treatment; to be opened by Dr. J. Barnes Burt.

Section of Obstetrics and Electro-Therapeutics.—Fri., 8 p.m., Special Discussion: The Position of Radium in the Treatment of Gynaecological Conditions. Openers: Mr. Malcolm Donaldson and Mr. Stanley Dodd (Obstetrics), Dr. A. E. Hayward Pinch and Dr. J. E. A. Lynham (Electro-therapeutics).

ROYAL MICROSCOPICAL SOCIETY, 20, Hanover Square, W.1.—Wed., 8 p.m., Dr. R. S. Clay and Mr. T. H. Court: Early Achromatic Microscopes by James Smith. Mr. D. V. Daran: Coincident Images made Use of in Mycological and Bacteriological Works with Reference to Single Spore Cultures; Reflection Magnification used for Physiological Experiments connected with Transpiration; A Note on Illuminating Objects for Microscopical Examination.

ROYAL SOCIETY OF TROPICAL MEDICINE AND HYGIENE, 11, Chandos Street, W.1.—Thurs., 7.45 p.m., Demonstration; 8.15 p.m., Dr. V. B. Wigglesworth: Some Notes on the Physiology of Insects related to Human Disease.

CHELSEA CLINICAL SOCIETY, Hotel Rembrandt, Thurloe Place, S.W.—Tues., Discussion: Defaecation; to be opened by Dr. Harold Pritchard and Mr. Ivor Back. Preceded by Dinner at 7.30 p.m.

MEDICAL OFFICERS OF SCHOOLS ASSOCIATION, 11, Chandos Street, W.1.—Fri., 5 p.m., Presidential Address by Dr. G. E. Friend: Some Notes on the Value of Clinical, Dietetic, and Physical Records in Public Schools.

MEDICAL SOCIETY OF LONDON, 11, Chandos Street, W.1.—Mon., 9 p.m., First Lettsomian Lecture on Enlarged Prostate and Prostatectomy by Sir John Thomson-Walker.

POST-GRADUATE COURSES AND LECTURES.

FELLOWSHIP OF MEDICINE AND POST-GRADUATE MEDICAL ASSOCIATION, 1, Wimpole Street, W.1.—Lecture at *Medical Society*, 11, Chandos Street, W.1: Tues., 4 p.m., Malaria Treatment of General Paralysis; no fee. *St. Mary's Hospital*, Paddington, W.2.: Wed., 3 p.m., Special Cases and Out-patients; no fee. *Central London Throat, Nose and Ear Hospital*, Gray's Inn Road, W.C.1: Wed., 2 p.m., Selected Operations on the Ear, Nose, and Throat; no fee. *Chelsea Hospital for Women*, Arthur Street, S.W.3: Special Course in Gynaecology; Lectures and Demonstrations in Operating Theatres; second week; fee £2 12s. 6d. *Hospital for Tropical Diseases*, 25, Gordon Street, W.C.1: Post-graduate Course, Tues. and Thurs., 2 p.m.; proportionate fees. *Bethlem Royal Hospital*, S.E.1: Tues. and Sat., 11 a.m., Lecture-Demonstrations of Psychological Medicine; proportionate fees. Copies of all syllabuses are obtainable from the Fellowship of Medicine.

CENTRAL LONDON THROAT, NOSE AND EAR HOSPITAL, Gray's Inn Road, W.C.1.—Mon., 1.30 p.m., The Mouth and Pharynx. Wed., 1.30 p.m., The Larynx. Fri., 4 p.m., Foreign Bodies in the Food and Air Passages.

KING'S COLLEGE HOSPITAL MEDICAL SCHOOL, Denmark Hill, S.E.5.—Thurs., 9 p.m., Enlargement of the Prostate and its Treatment.

LONDON SCHOOL OF DERMATOLOGY, St. John's Hospital, Leicester Square, W.C.2.—Tues., 5 p.m., Staphylococcal Infections. Thurs., 5 p.m., Pathology Demonstration.

NATIONAL HOSPITAL, Queen Square, W.C.1.—Mon., Tues., Thurs., and Fri., 2 p.m., Out-patient Clinics. Mon., 12 noon, Pathology of the Nervous System; 3.30 p.m., Control of Ocular Movements. Tues., 3.30 p.m., Central Disorders of Vision. Thurs., 3.30 p.m., Demonstration of Methods of Testing the Eighth Nerve. Fri., 12 noon, Anatomy and Physiology of the Nervous System; 3.30 p.m., Demonstration of Re-educative Exercises. Operations: Tues. and Fri., 9 a.m.

NORTH-EAST LONDON POST-GRADUATE COLLEGE, Prince of Wales's General Hospital, Tottenham, N.—Mon., 2.30 to 5 p.m., Medical, Surgical, and Gynaecological Clinics, Operations. Tues., 2.30 to 5 p.m., Medical, Surgical, Ear, Nose, and Throat Clinics, Operations. Wed., 2.30 to 5 p.m., Medical, Skin, and Eye Clinics, Operations. Thurs., 11.30 a.m., Dental Clinic; 2.30 to 5 p.m., Medical, Surgical, Nose, Throat, and Ear Clinics, Operations. Fri., 10.30 a.m., Throat, Nose, and Ear Clinics; 2.30 to 5 p.m., Surgical, Medical, and Children's Diseases Clinics, Operations.

ROYAL CHEST HOSPITAL, City Road, E.C.—Wed., 3.15 p.m., Treatment of Asthma.

SOUTH-WEST LONDON POST-GRADUATE ASSOCIATION, St. James's Hospital, Ouseley Road, Balham, S.W.—Wed., 4 p.m., Treatment of Osteo-arthritis and Rheumatoid Arthritis.

GLASGOW POST-GRADUATE MEDICAL ASSOCIATION.—At Royal Maternity and Women's Hospital: Wed., 4.15 p.m., Obstetrical Cases.

LIVERPOOL UNIVERSITY CLINICAL SCHOOL ANTE-NATAL CLINICS.—Royal Infirmary: Mon. and Thurs., 10.30 a.m. Maternity Hospital: Mon., Tues., Wed., Thurs., and Fri., 11.30 a.m.

MANCHESTER: ST. MARY'S HOSPITALS (Whitworth Street West Branch).—Fri., 4.15 p.m., Genital Prolapse.

SHEFFIELD UNIVERSITY POST-GRADUATE CLINICS.—At Jessop Hospital: Tues., 3.30 p.m., A Consideration of the Report of the Departmental Committee on the Training and Employment of Midwives. At Royal Infirmary: Fri., 3.30 p.m., Renal Tumours.

British Medical Association.

OFFICES, BRITISH MEDICAL ASSOCIATION HOUSE, TAVISTOCK SQUARE, W.C.1.

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SCOTTISH MEDICAL SECRETARY: 7, Drumsheugh Gardens, Edinburgh. (Telegrams: Associate, Edinburgh. Tel.: 24361 Edinburgh.)

IRISH MEDICAL SECRETARY: 16, South Frederick Street, Dublin. (Telegrams: Bacillus, Dublin. Tel.: 4737 Dublin.)

Diary of the Association.

FEBRUARY.

14 Fri. London: Maternity and Child Welfare Subcommittee, 2.30 p.m.
Chesterfield Division: Maternity Hospital, 8.15 p.m. Mr. Ernest Finch on Enlarged Prostate.
City Division: Metropolitan Hospital, Kingsland Road, E., 4.30 p.m. Clinical Meeting in conjunction with the Æsculapian Society.
Lewisham Division: Miller General Hospital, Greenwich, S.E.10, 8.45 p.m. Dr. Harold Pritchard on Some Points in Diagnosis and Treatment of Peptic Ulcer.
Wigan Division: Dr. G. B. Charnock on the Diagnosis of Tuberculous Hip.

18 Tues. London: Library Subcommittee, 2.30 p.m.
Croydon Division: Croydon General Hospital, 8.30 p.m. Mr. W. H. Trethowan on Some Common Orthopaedic Conditions occurring in General Practice.
Finchley Division: Finchley Memorial Hospital, 8.45 p.m. Dr. L. E. H. Whitby on the Laboratory and the Practitioner.
Reigate Division: East Surrey Hospital, 8.45 p.m. Dr. J. A. Drake on Skin Diseases in Children.
Stratford Division: Town Hall, Ilford, 9.15 p.m. Mr. A. J. Couzens on Fractures: Simple and Complicated by Lawyers and Others.
West Cornwall Division: Royal Cornwall Infirmary, Truro, 3 p.m.
West Suffolk Division: West Suffolk General Hospital, Bury St. Edmunds, 3 p.m. Annual Meeting.

19 Wed. Glasgow Division: Faculty Hall, 242, St. Vincent Street, 8.15 p.m.
Hyde Division: Hyde Town Hall, 8.30 p.m. Demonstration Address by Sir Robert Jones.

20 Thurs. Border Counties Branch: County Hotel, Carlisle, 6.30 p.m. B.M.A. Lecture by Sir James Barr on the Preservation of a Healthy and Efficient Circulatory System, from Childhood to Advanced Age. Branch Dinner.
Brighton Division: Sussex Eye Hospital. Clinical Meeting.
Nuneaton and Tamworth Division: Tamworth General Hospital. Mr. F. Douglas Marsh on Nasal Infections.
Tyneside Division: 8.15 p.m., Mr. G. Grey Turner on Indications for Operation and Some Considerations pertaining to their Results.

21 Fri. London: Consulting Pathologists Group Committee, 2.30 p.m.
London: Special Committee *re* References of Various Standing Committees, 2.30 p.m.
Glossop Division: Norfolk Hotel, Glossop, 9 p.m. Annual Meeting, preceded by a Dinner.

25 Tues. Camberwell Division: Bermondsey and Rotherhithe Hospital, 9 p.m., Clinical Meeting.
Harrow Division: Dr. Izod Bennett on Gastric Ulcer and Cancer.

26 Wed. London: Propaganda Subcommittee, 2.30 p.m.
Bradford Division: Dr. C. J. Young on Vaccines.
Edinburgh Branch: Royal Infirmary, Edinburgh, 3.15 p.m. Clinical Meeting. Dinner, B.M.A. House, Drumsheugh Gardens, 7 p.m.
North Middlesex Division: Dr. G. Grant Macdonald on the Management of Normal Labour.

27 Thurs. London: Charities Committee, 2.30 p.m.
Swansea Division: Hotel Metropole, 7.30 p.m. B.M.A. Lecture by Dr. Charles Bolton on the Relation of Medicine to Surgery in the Treatment of Gastric and Duodenal Ulcers.

28 Fri. London: Science Committee, 2.30 p.m.
Holland Division: White Hart Hotel, Spalding, 3 p.m. B.M.A. Lecture by Dr. J. Strickland Goodall on Recent Advances in the Diagnosis and Treatment of Cardiac Affections.

MARCH.

4 Tues. London: General Medical Services Scheme Committee, 2 p.m.
6 Thurs. London: Insurance Acts Committee, 11.30 a.m.
13 Thurs. London: Journal Committee, 2.30 p.m.
19 Wed. London: Finance Committee, 2.30 p.m.
20 Thurs. North of England Branch: Central Station Hotel, Newcastle-on-Tyne, 7.30 p.m. Annual Dinner.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcement of Births, Marriages, and Deaths is 9s., which sum should be forwarded with the notice not later than the first post on Tuesday morning, in order to ensure insertion in the current issue.

BIRTHS.

BULMAN.—At Hillside, Aylestone Hill, Hereford, on February 6th, 1930, to Dr. and Mrs. Bulman, a daughter.

COOK.—On February 8th, at Earl Shilton, Leicester, to Gwen (née Apthomas), wife of Dr. James Cook, a daughter.

LANZON.—On January 22nd, 1930, to Frances Veronica (*née* Thorp), wife of Dr. E. Lanzon, Iraq Health Service, at the Nursing Home, Railway Hospital, Baghdad, Iraq, a daughter.

O'CONNELL.—On February 4th, at St. Bernard House, Parkgate, Rotherham, to Dr. and Mrs. W. J. O'Connell, a daughter.

DEATH.

JORDAN, George Robert Leslie, M.B., B.Ch. T.C.D., 32, High Street, Halstead, Essex, dearly loved husband of Florence Jordan, and elder son of Samuel Jordan, Belfast, suddenly, after a brief illness, aged 34.

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